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Summary of Notifiable Diseases, United States

1999

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention (CDC)
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Preface

The *MMWR Summary of Notifiable Diseases, United States, 1999* contains, in tabular and graphical form, the official statistics for the reported occurrence of nationally notifiable diseases in the United States for 1999. These statistics are collected and compiled from reports to the National Notifiable Diseases Surveillance System (NNDSS), which is operated by CDC in collaboration with the Council of State and Territorial Epidemiologists (CSTE).

The *Summary* is located on the Internet at <http://www2.cdc.gov/mmwr/summary.html>. This site also includes publications from past years.

Because the dates of onset or diagnosis for notifiable diseases are not always reported, these surveillance data are presented by the week they were reported to CDC by public health officials in state and territorial health departments. These data are finalized and published each year in the *Summary* for use by state and local health departments; schools of medicine and public health; communications media; local, state, and federal agencies; and other agencies or persons interested in following the trends of reportable diseases in the United States. This publication also documents which diseases are considered national priorities for notification and the annual number of cases of such diseases.

The Highlights section presents information on selected nationally notifiable diseases to provide a context in which to interpret surveillance and disease-trend data and to provide further information on the epidemiology and prevention of selected diseases. Past publications included information on selected non-notifiable diseases, but this year's *Summary* presents only highlights of nationally notifiable diseases.

Part 1 contains tables that present incidence data for each of the diseases considered nationally notifiable during 1999.* The tables provide the number of cases of notifiable diseases reported to CDC for 1999, as well as the distribution of cases by month and geographic location and by patient's age, sex, race, and Hispanic ethnicity. The data are final totals as of August 15, 2000, unless otherwise noted. In all tables, leprosy is listed as Hansen disease, and tickborne typhus fever is listed as Rocky Mountain spotted fever (RMSF).

Part 2 contains graphs and maps. These graphs and maps depict summary data for many of the notifiable diseases described in tabular form in Part 1.

Part 3 contains tables that list the number of cases of notifiable diseases reported to CDC since 1968. This section also includes a table enumerating deaths associated with specified notifiable diseases reported to the National Center for Health Statistics (NCHS), CDC, during 1989–1998.

The Selected Reading section presents general and disease-specific references for notifiable infectious diseases. These references provide additional information on surveillance and epidemiologic issues, diagnostic issues, or disease control activities.

*Because no cases of anthrax, human rabies, or paralytic poliomyelitis were reported in the United States during 1999, these diseases do not appear in the tables in Part 1.

Background

As of January 1, 1999, a total of 58 infectious diseases were designated as notifiable at the national level. A notifiable disease is one for which regular, frequent, and timely information regarding individual cases is considered necessary for the prevention and control of the disease. This section briefly summarizes the history of the reporting of nationally notifiable diseases in the United States.

In 1878, Congress authorized the U.S. Marine Hospital Service (i.e., the forerunner of the Public Health Service [PHS]) to collect morbidity reports regarding cholera, smallpox, plague, and yellow fever from U.S. consuls overseas. The intention was to use this information to institute quarantine measures to prevent the introduction and spread of these diseases into the United States. In 1879, a specific Congressional appropriation was made for the collection and publication of reports of these notifiable diseases. Congress expanded the authority for weekly reporting and publication of these reports in 1893 to include data from states and municipal authorities. To increase the uniformity of the data, Congress enacted a law in 1902 directing the Surgeon General to provide forms for the collection and compilation of data and for the publication of reports at the national level. In 1912, state and territorial health authorities — in conjunction with PHS — recommended immediate telegraphic reporting of five infectious diseases and the monthly reporting, by letter, of 10 additional diseases. The first annual summary of *The Notifiable Diseases* in 1912 included reports of 10 diseases from 19 states, the District of Columbia, and Hawaii. By 1928, all states, the District of Columbia, Hawaii, and Puerto Rico were participating in national reporting of 29 specified diseases. At their annual meeting in 1950, state and territorial health officers authorized the Council of State and Territorial Epidemiologists (CSTE) to determine which diseases should be reported to PHS. In 1961, CDC assumed responsibility for the collection and publication of data concerning nationally notifiable diseases.

The list of nationally notifiable diseases is revised periodically. For example, a disease might be added to the list as a new pathogen emerges, or a disease might be deleted as its incidence declines. Public health officials at state health departments and CDC continue to collaborate in determining which diseases should be nationally notifiable. CSTE, with input from CDC, makes recommendations annually for additions and deletions. Although disease reporting is mandated (i.e., by legislation or regulation) at the state and local levels, state reporting to CDC is voluntary. Thus, the list of diseases considered notifiable varies slightly by state. All states generally report the internationally quarantinable diseases (i.e., cholera, plague, and yellow fever) in compliance with the World Health Organization's International Health Regulations.

The list of infectious diseases designated as notifiable at the national level during 1999 is as follows:

Infectious Diseases Designated as Notifiable at the National Level During 1999

Acquired immunodeficiency syndrome (AIDS)
Anthrax
Botulism
Brucellosis
Chancroid
Chlamydia trachomatis, genital infection
Cholera
Coccidioidomycosis
Cryptosporidiosis
Cyclosporiasis
Diphtheria
Ehrlichiosis, human granulocytic
Ehrlichiosis, human monocytic
Encephalitis, California serogroup viral
Encephalitis, eastern equine
Encephalitis, St. Louis
Encephalitis, western equine
Escherichia coli O157:H7
Gonorrhea
Haemophilus influenzae, invasive disease
Hansen disease (leprosy)
Hantavirus pulmonary syndrome
Hemolytic uremic syndrome, postdiarrheal
Hepatitis A
Hepatitis B
Hepatitis C; non-A, non-B
Human immunodeficiency virus (HIV) infection, adult
HIV infection, pediatric
Legionellosis
Lyme disease
Malaria
Measles
Meningococcal disease
Mumps
Pertussis
Plague
Poliomyelitis, paralytic
Psittacosis
Rabies, animal
Rabies, human
Rocky Mountain spotted fever
Rubella
Rubella, congenital syndrome
Salmonellosis
Shigellosis
Streptococcal disease, invasive, group A
Streptococcus pneumoniae, drug-resistant, invasive disease
Streptococcal toxic-shock syndrome
Syphilis
Syphilis, congenital
Tetanus
Toxic-shock syndrome
Trichinosis
Tuberculosis
Typhoid fever
Varicella (chickenpox)*
Varicella deaths
Yellow fever

*Although varicella (chickenpox) is not a nationally notifiable disease, the Council of State and Territorial Epidemiologists recommends reporting cases of this disease to CDC.

Data Sources

Provisional data concerning the reported occurrence of notifiable diseases are published weekly in the *MMWR*. After each reporting year, staff in state health departments finalize reports of cases for that year with local or county health departments and reconcile the data with reports previously sent to CDC throughout the year. These data are compiled in final form in the *Summary*.

Notifiable disease reports are the authoritative and archival counts of cases. They must be approved by the appropriate epidemiologist from each submitting state or territory before being published in the *Summary*. Although useful for detailed epidemiologic analyses, data published in *CDC Surveillance Summaries* or other surveillance reports produced by CDC programs can be different from data reported in the annual summary because of differences in the timing of reports, the source of the data, and the case definitions.

Data in the *Summary* were derived primarily from reports transmitted to the Division of Public Health Surveillance and Informatics, Epidemiology Program Office, CDC, from health departments in the 50 states, five territories, New York City, and the District of Columbia through the National Electronic Telecommunications System for Surveillance (NETSS). More information regarding NETSS and notifiable diseases, including case definitions for these conditions, is available on the Internet at <http://www.cdc.gov/epo/phs.htm>. Policies for reporting notifiable disease cases can vary by disease or reporting jurisdiction, depending on case status classification (i.e., confirmed, probable, or suspect).

Final data for selected diseases (presented in Parts 1, 2, and 3) are from the surveillance records of the CDC programs listed below. Requests for further information regarding these data should be directed to the appropriate program.

National Center for Health Statistics (NCHS)

Office of Vital and Health Statistics Systems (deaths from selected notifiable diseases).

National Center for Infectious Diseases (NCID)

Division of Bacterial and Mycotic Diseases (toxic-shock syndrome; streptococcal disease, invasive, group A; streptococcal toxic-shock syndrome; and laboratory data regarding botulism, *Escherichia coli* O157:H7, salmonellosis, and shigellosis).

Division of Viral and Rickettsial Diseases (animal rabies, hantavirus pulmonary syndrome).

National Center for HIV, STD, and TB Prevention (NCHSTP)

Division of HIV/AIDS Prevention — Surveillance and Epidemiology (acquired immunodeficiency syndrome [AIDS]).

Division of Sexually Transmitted Diseases Prevention (chancroid, chlamydia, gonorrhea, and syphilis).

Division of Tuberculosis Elimination (tuberculosis).

National Immunization Program (NIP)

Epidemiology and Surveillance Division (poliomyelitis; *Haemophilus influenzae*, invasive disease, type B; and varicella).

Disease totals for the United States, unless otherwise stated, do not include data for American Samoa, Guam, Puerto Rico, the U.S. Virgin Islands, or the Commonwealth of the Northern Mariana Islands (CNMI).

Population estimates for the states are from the July 1, 1999, estimates by the U.S. Department of Commerce, Economics, and Statistics Administration, Bureau of the Census, Population Division, Population Distribution Branch, Internet press release ST-99-1, December 29, 1999.* Population numbers for territories are 1998 estimates from Bureau of the Census press release PR-99-1* and CB98-219.† More information regarding census estimates is available at <http://www.census.gov/>.

Rates in the *Summary* are presented as incidence rates per 100,000 population, based on data for the U.S. total-resident population. However, population data from states in which diseases were not notifiable or disease data were not available were excluded from rate calculations.

Interpreting Data

The data reported in the *Summary* are useful for analyzing disease trends and determining relative disease burdens. However, these data must be interpreted in light of reporting practices. Some diseases that cause severe clinical illness (e.g., plague and rabies) are most likely reported accurately, if they were diagnosed by a clinician. However, persons who have diseases that are clinically mild and infrequently associated with serious consequences (e.g., salmonellosis) might not seek medical care from a health-care provider. Even if these less severe diseases are diagnosed, they are less likely to be reported.

The degree of completeness of data reporting also is influenced by the diagnostic facilities available; the control measures in effect; the public awareness of a specific disease; and the interests, resources, and priorities of state and local officials responsible for disease control and public health surveillance. Finally, factors such as changes in the case definitions for public health surveillance, the introduction of new diagnostic tests, or the discovery of new disease entities can cause changes in disease reporting that are independent of the true incidence of disease.

Public health surveillance data are published for selected racial and ethnic population groups because these variables can be risk markers for certain notifiable diseases. Risk markers can identify potential risk factors for investigation in future studies. Race and ethnicity data also can be used to target populations for prevention efforts. However, caution must be used when drawing conclusions from reported race and ethnicity data. Certain racial/ethnic population groups have differential patterns of access to health care, potentially resulting in data that are not representative of disease incidence in these populations.

In addition, not all race and ethnicity data are collected uniformly for all diseases. For example, in NCHSTP, the Division of HIV/AIDS Prevention — Surveillance and Epidemiology and the Division of Sexually Transmitted Diseases Prevention collect race/ethnicity data using a single variable. A person's race/ethnicity is reported as American Indian/Alaskan Native, Asian/Pacific Islander, black non-Hispanic, white non-Hispanic, or Hispanic. Additionally, although the recommended standard for classifying a person's race or ethnicity is based on self-reporting, this procedure might not always be followed.

*Available at <http://www.census.gov/population/estimates/state/st-99-1.txt>. Accessed January 29, 2001.

†Available at <http://www.census.gov/Press-Release/cb98-219.html>. Accessed January 29, 2001.

Highlights for 1999

The Highlights section presents information on the public health importance of selected nationally notifiable diseases, including a) domestic and some international disease outbreaks, b) active surveillance findings, c) changes in data reporting practices, d) the impact of prevention programs, e) the emergence of antimicrobial resistance, and f) changes in immunization policies. This information is intended to provide a context in which to interpret surveillance and disease-trend data and to provide further information on the epidemiology and prevention of selected diseases.

AIDS

The annual incidence of acquired immunodeficiency syndrome (AIDS) and deaths among persons with AIDS declined during 1996, reflecting the beneficial impact of newly available therapies. Although this trend continued through 1998, provisional data for 1999 suggest that the number of AIDS cases and deaths might be leveling. Before the widespread availability of effective treatments, AIDS surveillance data were representative of underlying trends in human immunodeficiency virus (HIV) transmission. Because of changes in the epidemiology of AIDS associated with treatment successes, AIDS incidence no longer accurately reflects HIV incidence trends. AIDS data now reflect a combination of factors, including a) variation in HIV transmission patterns over a long period, b) differences in access to and use of testing and treatment among populations who are at risk or infected, and c) treatment regimens that might be failing because of drug resistance and poor adherence.

To provide better data for HIV prevention efforts, CDC and the Council of State and Territorial Epidemiologists (CSTE) have recommended that national surveillance expand to include both HIV infection and AIDS cases (*MMWR* 1999;48[RR-13]; CSTE position statement ID-4, 1997). An integrated national HIV/AIDS surveillance system would provide information regarding persons in whom HIV infection has been newly diagnosed, persons with severe HIV disease (AIDS), and those dying of HIV disease. Currently, at the local level, 33 states and 1 U.S. territory report HIV infections by the patient's name, 6 states and 1 U.S. territory use codes provided by health-care providers for HIV reporting, and 2 states convert names to codes after a report is received.

Chancroid

In 1999, a total of 143 cases of chancroid was reported to CDC, for a rate of 0.1 cases/100,000 population. The number of cases reported in 1999 represent a 24.3% decline from 1998 and a continuing decline since 1987. However, chancroid is difficult to culture and could be substantially underdiagnosed. Several studies that have used DNA amplification tests (which are not commercially available) have identified this infection in cities where it was previously undetected (*J Infect Dis* 1998;178:1795–8).

Chlamydia trachomatis, Genital Infection

In 1999, a total of 656,721 cases of genital chlamydial infection was reported to CDC, for a rate of 254.1 cases/100,000 population. This is the highest rate of chlamydial infection reported to CDC since voluntary case reporting began in the mid-1980s. It is also the highest rate since genital chlamydial infection became a nationally notifiable disease in 1995. This increase is primarily caused by the continued expansion of chlamydia screening programs and the increased use of more sensitive diagnostic tests for this condition. Since the late 1980s, data on chlamydia prevalence obtained by monitoring test positivity rates of persons screened in different clinic settings have generally

documented declining levels of infection in many parts of the United States (CDC. Sexually transmitted disease surveillance 1999 supplement: Chlamydia Prevalence Monitoring Project. November 2000).

Cholera

During 1995–1999, a total of 53 laboratory-confirmed cases of cholera, all caused by *Vibrio cholerae* O1, was reported to CDC. Twenty-nine (53%) patients were hospitalized, and one died. Thirty-six (68%) infections were acquired outside the United States, whereas four (8%) were acquired through consumption of contaminated seafood harvested in Gulf Coast waters. Among travel-associated cholera cases, 32% of isolates were resistant to trimethoprim-sulfamethoxazole, sulfisoxazole, streptomycin, and furazolidone. Thus, foreign travel and contaminated seafood continue to account for most cholera cases in the United States, and antimicrobial resistance is increasing among *V. cholerae* O1 strains isolated from ill travelers.

Diphtheria

In 1999, no probable or confirmed cases of toxigenic *Corynebacterium diphtheriae* were reported in the United States. However, one man aged 75 years who had visited a nondairy cattle farm 2 weeks earlier died of an illness clinically consistent with respiratory diphtheria. A toxigenic strain of *C. ulcerans* was isolated from a throat swab from the patient. *C. ulcerans* is primarily an animal pathogen, but can be toxigenic and cause fatal or nonfatal clinical respiratory diphtheria in humans.

Gonorrhea

In 1999, a total of 360,076 cases of gonorrhea was reported to CDC, for a rate of 133.2 cases/100,000 population. This was a 9.2% increase over the 1997 rate (122.0/100,000) and a 1.2% increase over the 1998 rate (131.6/100,000). Possible reasons for this trend include expansion of screening programs (motivated by the availability of simultaneous testing for genital chlamydial infections), increased use of new diagnostic tests with improved sensitivity, improvements in surveillance systems, and true increases in morbidity in some geographic areas and segments of the population.

Haemophilus influenzae, Invasive Disease

In 1999, a total of 261 cases of *Haemophilus influenzae* (Hi) invasive disease among children aged <5 years was reported (data was provided by the National Immunization Program and were based on date of onset, not *MMWR* week). Before a vaccine was introduced in 1987, approximately 20,000 cases of *H. influenzae* type b (Hib) invasive disease occurred among children annually (*JAMA* 1993;269:221–6). Because of widespread use of the Hib vaccine among preschool-aged children, the number of Hib cases has declined sharply. Of the 261 cases reported during 1999, a total of 215 (82%) Hi isolates were serotyped, and 71 (33%) of these were type b. Among the 71 cases of Hib invasive disease reported among children aged <5 years, 30 (42%) were among those aged <6 months, which is too young to have completed a three-dose primary Hib vaccination. However, 23 (56%) of the 41 children who were old enough (i.e., aged ≥6 months) to have completed a three-dose primary series either had unknown vaccination status (3 children) or were incompletely vaccinated (20 children). These cases might have been prevented with age-appropriate vaccination.

Hantavirus Pulmonary Syndrome

In 1999, a total of 42 probable cases of hantavirus pulmonary syndrome (HPS) from 15 states was reported to CDC's National Center for Infectious Diseases; of the 33 cases that were laboratory confirmed by CDC, 10 (30%) were fatal. CDC also confirmed two case-patients with hantavirus infection that did not develop into HPS. Since surveillance began in 1993, cases of HPS have been reported from Canada, Argentina, Paraguay, Brazil, Uruguay, Chile, and Bolivia. Cases with onset in 1999 were retrospectively recognized from Panama, the first Central American country to report HPS. HPS is caused by several hantaviruses in the Western Hemisphere, and most have specific sigmodontine rodent reservoirs of the family *Muridae*. Although most HPS in the United States is caused by Sin Nombre virus and its variants (i.e., New York and Monongahela), some cases have been associated with other hantaviruses, including Bayou and Black Creek Canal. Virus is shed in rodent urine, feces, and saliva, then transmitted through inhalation.

Hemolytic Uremic Syndrome, Postdiarrheal

Postdiarrheal hemolytic uremic syndrome (HUS) is a life-threatening illness characterized by hemolytic anemia, thrombocytopenia, and renal injury. In the United States, most cases are caused by infection with *Escherichia coli* O157:H7 or other Shiga toxin-producing *E. coli*. In 1999, the fourth year of national reporting, 26 states reported 181 cases of postdiarrheal HUS to CDC. The median age of patients was 4 years (range: <1–93), and 58% of patients were female. Illness was seasonal, with 54% of cases occurring during June–September.

By comparison, 17 states reported 119 cases in 1998, and 20 states reported 93 cases in 1997. Although the number of areas reporting and the number of cases reported increased in 1999, eight states and at least one territory did not list HUS as a notifiable disease in 1999, contributing to substantial underreporting.

Hepatitis A

Routine childhood hepatitis A vaccination is recommended in the 11 states where the average annual hepatitis A rate during 1987–1997 was ≥20 cases/100,000 population (i.e., approximately twice the national average). Routine childhood vaccination should be considered in the six states where the average rate during 1987–1997 was at least 10 cases/100,000 population, but <20/100,000 population.

The overall rate of hepatitis A reported during 1999 was the lowest recorded. However, because hepatitis A rates tend to vary from year to year and from region to region, determining whether this low rate is caused by routine immunization or the natural variability in infection rates is impossible. Monitoring the incidence of hepatitis A to determine if these low rates are sustained over time is critical to assessing the impact of routine vaccination.

Hepatitis B

Reported cases of acute hepatitis B have decreased >60% during the past decade, from 21,102 cases in 1990 to 7,694 cases in 1999. Surveillance data are being used to monitor the impact of the national strategy for eliminating hepatitis B virus (HBV) infection. *Healthy People 2010* objectives call for a 75–90% reduction in the national incidence of hepatitis B among adults (baseline: 15–24 cases/100,000 persons), a 99% reduction among children aged 2–18 years (baseline: 945 cases/year), and a 75% reduction in the number of perinatal HBV infections (baseline: 1,682 infections/year).

Reported hepatitis B cases can be used to monitor the occurrence of disease among adults. However, because most infections among infants and young children are asymptomatic, reported cases underestimate the incidence of disease in these age groups. Thus, data from other sources (e.g., serosurveys) are needed to monitor progress toward eliminating HBV transmission among younger age groups.

Hepatitis C; Non-A, Non-B

Cases of hepatitis C reported to the National Notifiable Disease Surveillance System (NNDSS) are considered unreliable because a) there is no serologic marker for acute infection and b) most health departments do not have the resources to determine if a positive laboratory report for hepatitis C virus (HCV) infection represents acute infection, chronic infection, repeated testing of a person previously reported, or a false-positive result. Historically, the most reliable national estimates of acute disease incidence have come from sentinel surveillance. After adjusting for underreporting and asymptomatic infections, the annual number of new infections has decreased >80% since 1989 to 38,000 cases in 1997 (CDC, unpublished data, 1999). Because surveillance for acute hepatitis C provides the best means to evaluate the effectiveness of prevention efforts and identify missed opportunities for prevention, efforts are underway to help states improve and establish surveillance.

HIV Infection, Adult

In 1998–1999, reports based on AIDS data indicated that the recent decline in AIDS cases and deaths was slowing. Because of improvements in treatment and care of persons infected with HIV, these data could represent a) persons whose treatment was unsuccessful, b) persons who were not tested for HIV before developing AIDS, or c) persons who did not seek or have access to testing and treatment earlier. Public health officials need data concerning persons in whom HIV infection was diagnosed before AIDS to determine who could benefit from prevention and treatment services. In June 1997, reporting of HIV infection among adults and adolescents (i.e., persons aged ≥13 years) was added to the list of nationally notifiable diseases at the annual CSTE meeting. CSTE recommended that all states and U.S. territories implement confidential HIV infection reporting based on methods that provide accurate and representative data for all persons diagnosed confidentially. Recommendations for implementing national HIV case surveillance were published in December 1999, and the revised surveillance case definition became effective January 1, 2000. Currently, 33 states and the U.S. Virgin Islands have implemented confidential reporting of HIV among adults and adolescents as an extension of current AIDS surveillance.

HIV Infection, Pediatric

In 1999, AIDS surveillance data indicated continued, substantial declines in perinatally acquired AIDS, reflecting declines in perinatal HIV transmission. HIV surveillance data indicated that the increasing use of zidovudine by mothers and newborns was temporally associated with this decline, demonstrating success in nationwide efforts to implement Public Health Service guidelines for routine, voluntary prenatal HIV testing (*MMWR* 1995;44[No. RR-7]) and the use of zidovudine to reduce perinatal HIV transmission (*MMWR* 1998;47[RR-2]).

States that conduct surveillance for perinatally exposed and infected children aged <13 years can evaluate the impact of the guidelines and document resources needed to care for perinatally exposed infants. In 1999, a total of 33 states and the U.S. Virgin

Islands conducted surveillance for HIV infection among children, reporting 233 children whose infection had not progressed to AIDS and 123 children who had AIDS. These states also received 2,004 new reports of perinatally exposed children who required follow-up with health-care providers to determine their HIV infection status. Recommendations for implementing a national HIV case surveillance were published in December 1999, and the revised surveillance case definition became effective January 1, 2000. Enhanced programmatic and surveillance efforts to further reduce perinatal HIV transmission are underway.

Lyme Disease

In 1999, approximately 16,273 cases of Lyme disease were reported to CDC. Most cases continue to be reported from the northeastern and north-central United States. CDC promotes community-based prevention of Lyme disease using a combination of strategies aimed at reducing vector tick densities, preventing human exposure to infected vector ticks, and vaccinating persons aged 15–70 years when appropriate. A model prevention project is underway in a community in Connecticut. CDC plans to expand prevention projects to other endemic areas.

Measles

In 1999, a total of 100 confirmed cases of measles was reported. Thirty-one states and the District of Columbia reported no confirmed measles cases. Forty-two case-patients were aged <5 years, 26 were aged 5–19 years, and 32 were aged ≥20 years. Eleven outbreaks (range: 3–15 cases) were reported. Of the 100 cases reported, 33 were imported from outside the United States, and exposure to these case-patients caused 33 additional cases. The remaining 34 cases were of unknown source. Genotypic analysis of isolated measles viruses in seven chains of transmission showed no evidence of an endemic strain (*MMWR* 2000:49:557–60). In 1999, CDC convened a panel of expert consultants to review the information on measles epidemiology, molecular virology, surveillance quality, and population immunity in the United States. The experts concluded that measles is not currently endemic in the United States. Because of the continued threat of imported measles, high population immunity must be maintained to continue low levels of transmission.

Pertussis

Since 1980, the number of reported cases of pertussis has increased in the United States. The reasons for this rise are unknown, but could include increased awareness of pertussis among health-care providers, increased use of more sensitive diagnostic tests, and better reporting of cases to health departments. Of 7,288 cases reported during 1999, a total of 27% occurred among children aged <7 months, who were too young to have received the recommended three doses of a pertussis-containing vaccine; 11% were among preschool-aged children (i.e., those aged 1–4 years); and 28% were among children aged 10–19 years. Since 1995, the coverage rate with at least three doses of a pertussis-containing vaccine has been 95% among U.S. children aged 19–35 months (*MMWR* 2000;49:585–9). Because vaccine-induced immunity wanes approximately 5–10 years after pertussis vaccination, adolescents can become susceptible to disease. Since 1990, the incidence of pertussis among preschool-aged children has not changed, but the incidence among adolescents has increased in some states (*Clin Inf Dis* 1999;28:1230–7).

Poliomyelitis, Paralytic

A sequential schedule of inactivated poliovirus vaccine (IPV) and live, attenuated oral poliovirus vaccine (OPV) (i.e., two doses of IPV followed by two doses of OPV) was introduced in 1997 for routine childhood polio vaccination in the United States. Since implementation of this schedule, five cases of vaccine-associated paralytic poliomyelitis (VAPP) with onset in 1997 and two cases with onset in 1998 have been confirmed. Three of these cases were associated with administration of the first or second dose of OPV to children who had not previously received IPV, and one of the 1998 cases was associated with the third dose of OPV. Before the sequential schedule, the average annual number of VAPP cases was eight, which suggests that VAPP has declined since introduction of the sequential schedule. Continued monitoring with additional observation time is required to confirm these preliminary findings because of potential delays in reporting. Further reductions are expected because the Advisory Committee on Immunization Practices (ACIP) has approved an all-IPV schedule beginning January 2000, which is intended to eliminate the risk for VAPP.

Rubella and Rubella, Congenital Syndrome

During the 1990s, rubella cases declined substantially in the United States, from 1,125 reported cases in 1990 to 267 reported cases in 1999. Since 1997, approximately 19 rubella outbreaks have occurred in the United States, mostly among persons born in countries that do not have routine rubella vaccination programs or that have only recently implemented such programs. During the 1990s, <10 cases of congenital rubella syndrome have been reported annually; most cases were among infants born to mothers born outside the United States.

Shigellosis

Shigella sonnei infections continue to account for most shigellosis in the United States. Prolonged, communitywide outbreaks of *S. sonnei* infections that are transmitted in child care centers and other settings where maintenance of good hygienic conditions requires special care account for much of the problem. *S. sonnei* can also be transmitted through contaminated foods and through water used for drinking or recreational purposes.

Streptococcal Disease, Invasive, Group A

In 1999, approximately 10,200 cases of invasive group A streptococcal (GAS) disease and 1,200 deaths occurred nationally, according to reports from the Active Bacterial Core Surveillance (ABCs) project under CDC's Emerging Infections Program. This program operates in eight states (California, Connecticut, Georgia, Maryland, Minnesota, New York, Oregon, and Tennessee). During 1999, the incidence of this disease was 3.8 cases/100,000 population. Rates were highest among children aged <1 year (4.6 cases/100,000) and adults aged ≥65 years (9.2 cases/100,000). Streptococcal toxic-shock syndrome and necrotizing fasciitis accounted for approximately 3.4% and 6.0% of invasive cases, respectively. The overall case-fatality rate among patients with invasive GAS disease was 11.8%. CDC identifies invasive GAS isolates based on sequences of the variable portion of the M-protein gene (i.e., *emm* typing); 9.3% of the 645 GAS isolates submitted and *emm* typed in 1999 were newly recognized *emm* types.

Streptococcus pneumoniae, Drug-Resistant, Invasive Disease

In 1999, the ABCs project of CDC's Emerging Infections Program collected information on invasive pneumococcal disease, including drug-resistant *Streptococcus pneumoniae*, in eight states (California, Connecticut, Georgia, Maryland, Minnesota, New York, Oregon, and Tennessee). Of the 3,745 *S. pneumoniae* isolates collected, 10.3% exhibited intermediate resistance to penicillin (minimum inhibitory concentration [MIC] 0.1–1 ug/mL), and 16.7% were fully resistant (MIC ≥2 ug/mL). For cefotaxime, 11.1% of all isolates had intermediate resistance and 5.9% were resistant. For erythromycin, 20.7% were resistant. Nearly 1 in 5 (18%) isolates were not susceptible to ≥3 classes of drugs commonly used to treat pneumococcal infections. In February 2000, the U.S. Food and Drug Administration licensed a pneumococcal conjugate vaccine for use in infants and young children. Information is available on the Internet at <http://www.fda.gov/cber/products/pneuled021700.htm>. Among isolates from children aged <5 years reported to ABCs during 1999, a total of 76.7% of all strains (n=977) and 81.4% of strains not susceptible to penicillin (n=370) were serotypes included in this 7-valent vaccine.

Syphilis, Congenital

In 1999, a total of 556 cases of congenital syphilis was reported to CDC, for a rate of 14.3 cases/100,000 live births. Like primary and secondary syphilis, the rate of congenital syphilis has declined sharply in recent years, from a peak of 107.3/100,000 in 1991. Congenital syphilis persists in the United States because a substantial number of women don't receive syphilis serologic testing until late in their pregnancy or not at all. This lack of screening is often related to a lack of prenatal care or late prenatal care (*MMWR* 1999;48:757–61).

Syphilis, Primary and Secondary

In 1999, a total of 6,657 primary and secondary syphilis cases was reported to CDC. During 1990–1998, the primary and secondary syphilis rate declined 88%, from 20.3 cases/100,000 population to 2.5/100,000. This is the lowest level since reporting began in 1941. Although syphilis has declined in all regions of the United States and in all racial/ethnic groups, rates remain disproportionately high in the South and among non-Hispanic blacks, and focal outbreaks continue to occur, including recent outbreaks among men who have sex with men.

Tetanus

In 1999, a total of 40 cases of tetanus was reported. Five (12.5%) cases were among persons aged <25 years, 22 (55.0%) were among persons aged 25–59 years, and 13 (32.5%) were among persons aged >59 years. The percentage of cases among persons aged 25–59 years has increased during the last decade; previously, most cases were among persons aged >59 years. Seven of the cases among persons aged 25–59 years were reported in intravenous drug users; two of these cases were fatal. Two cases were in children (aged 4 and 5 years) who had never been vaccinated against tetanus because of their parents' philosophic objection to vaccination.

Tuberculosis

In 1999, a total of 17,531 tuberculosis (TB) cases (rate: 6.4 cases/100,000 population) was reported to CDC from all states and the District of Columbia. This is a 5% decrease from 1998 and a 34% decrease from 1992, when cases peaked during the resurgence of

TB in the United States. During 1992–1999, TB cases among U.S.-born persons decreased 49%, whereas cases among foreign-born persons increased 4%. Since 1993, when states began reporting initial drug susceptibility results to CDC, the number of multidrug-resistant TB (MDR TB) cases among persons with no history of TB decreased from >400 (2.5%) to <150 (1.1%).

These declines appear to be the result of successful efforts to strengthen TB control after the resurgence of TB and the emergence of MDR TB. The relatively stable number of cases reported among foreign-born persons supports the inference that most cases are caused by infection with *Mycobacterium tuberculosis* in the person's country of origin. CDC has collaborated with state and local health departments to publish recommendations for enhancing TB control efforts among foreign-born persons and is working with these jurisdictions to expand current efforts based on these recommendations (*MMWR* 1998;47[No. RR-16]).

Typhoid Fever

In 1999, typhoid fever was diagnosed in 346 persons in the United States. Despite the availability of effective vaccines, NNDSS reports 300–400 cases each year. Approximately 80% of these cases occur among persons who report international travel during the preceding 6 weeks. Persons traveling to and from their country of origin appear to be at high risk (*JAMA* 2000;283:2668–73). In many areas of the world, *Salmonella* Typhi strains have acquired resistance to multiple antimicrobial agents, including ampicillin, chloramphenicol, and trimethoprim-sulfamethoxazole (*JAMA* 2000;283:2668–73).

Varicella

In 1995, varicella vaccine was licensed in the United States. During 1999, vaccine coverage among children aged 19–35 months was 59%. Although varicella is not a nationally notifiable disease, seven states maintained adequate levels of reporting by reporting varicella cases constituting ≥5% of their birth cohort during 1990–1995. Although the number of reported cases varied annually, the number declined steadily in these states during 1997–1999. The marked decline in reported cases in 1999 is consistent with data from active varicella surveillance (in which attenuation of seasonality and marked decline in reported cases occurred in 1999) and is suggestive of vaccine impact (CDC, unpublished data, 2000). Ongoing surveillance will be important to monitor impact of the varicella vaccination program.

PART 1

Summaries of Notifiable Diseases in the United States, 1999

EXPLANATION OF SYMBOLS USED IN TABLES

Data not available	NA
Report of disease is not required in that jurisdiction (not notifiable)	NN
No reported cases	—
Commonwealth of Northern Mariana Islands	C.N.M.I.
Puerto Rico	P.R.
U.S. Virgin Islands	V.I.

TABLE 1. Reported cases of notifiable diseases,* by month, United States, 1999

Disease	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
AIDS†	45,104	3,084	3,878	4,450	3,357	3,784	4,556	3,240	3,887	3,834	3,371	3,567	4,096
Botulism, foodborne	23	—	3	1	1	1	4	2	1	3	4	1	2
Infant	92	3	7	2	7	13	4	11	4	10	14	8	9
Other (includes wound)	39	4	1	3	1	1	4	3	5	1	2	4	10
Brucellosis	82	3	6	2	4	4	4	10	6	4	4	5	30
Chancroid§	143		24			24			64			31	
Chlamydia¶	656,721		153,227			162,460			163,475			177,559	
Cholera	6	—	—	—	—	2	—	2	—	1	—	—	1
Cryptosporidiosis	2,361	55	113	102	146	163	179	198	211	361	342	181	310
Cyclosporiasis	56	—	—	—	4	6	5	10	17	5	1	1	7
Diphtheria	1	—	—	—	—	—	—	—	—	—	—	—	1
Ehrlichiosis, human granulocytic	203	1	3	5	10	12	38	33	17	18	9	10	47
Human monocytic	99	2	1	2	1	—	4	19	14	8	5	6	37
Encephalitis, California serogroup viral	70	—	—	—	—	—	1	2	19	14	24	6	4
Eastern equine	5	—	—	—	—	—	1	1	—	2	—	—	1
St. Louis	4	—	—	—	—	—	—	—	—	—	2	1	1
Western equine	1	—	—	—	—	—	—	—	—	—	—	1	—
Escherichia coli 0157:H7	4,513	78	77	91	88	167	216	493	509	869	532	325	1,048
Gonorrhea†	360,076		80,692			84,600			96,231			98,553	
Haemophilus influenzae, invasive disease	1,309	77	109	103	90	121	97	138	75	76	101	83	239
Hansen disease (leprosy)	108	6	7	7	4	20	6	8	10	12	13	4	11
Hantavirus pulmonary syndrome**	33	1	3	5	5	5	6	3	1	2	1	—	1
Hemolytic uremic syndrome, postdiarrheal	181	3	5	4	2	9	14	19	21	14	16	12	62
Hepatitis A	17,047	1,080	1,446	1,316	1,365	1,635	1,184	1,426	1,194	1,365	1,537	1,298	2,201
Hepatitis B	7,694	337	418	604	573	747	610	679	601	558	605	536	1,426
Hepatitis C; non-A, non-B	3,111	114	174	170	216	295	257	337	197	253	350	270	478
Legionellosis	1,108	48	87	66	64	68	78	98	76	106	142	91	184
Lyme disease	16,273	253	332	375	433	752	1,306	3,394	2,291	2,026	1,960	1,249	1,902
Malaria	1,666	79	101	81	70	117	117	184	159	141	170	100	347
Measles	100	12	6	8	14	15	2	6	3	4	15	7	8
Meningococcal disease	2,501	156	233	300	216	268	189	205	125	135	189	122	365
Mumps	387	22	36	42	25	38	28	39	16	22	38	24	57
Pertussis (whooping cough)	7,288	305	322	625	651	495	422	527	548	628	730	630	1,405
Plague	9	—	—	—	—	—	2	—	1	3	—	2	1
Psittacosis	16	3	1	2	3	—	—	1	1	—	2	1	2
Rabies, animal	6,730	298	421	479	540	746	905	861	590	660	753	474	603
Rocky Mountain spotted fever	579	10	9	7	13	30	53	125	118	67	89	43	45
Rubella, congenital syndrome	9	—	—	1	1	—	2	—	—	1	3	1	—
Rubella	267	—	2	5	17	46	72	35	39	15	6	3	27
Salmonellosis	40,596	1,702	1,814	1,788	2,009	3,173	3,253	5,222	4,177	4,152	5,024	3,259	5,023
Shigellosis	17,521	930	942	858	809	1,383	1,293	1,757	1,720	1,850	2,051	1,487	2,441
Streptococcal disease, invasive, group A	2,382	107	169	211	218	294	154	219	113	119	184	171	423
Streptococcus pneumoniae, drug-resistant, invasive disease	4,618	114	194	315	281	734	211	333	194	136	250	211	1,645
Streptococcal toxic-shock syndrome	61	1	8	12	8	11	4	2	1	1	3	1	10
Syphilis, congenital (age <1 yr)††	556		156			124			142			134	
Primary and secondary §	6,657		1,561			1,600			1,778			1,718	
Total (all stages)§	35,628		9,184			8,956			8,487			9,001	
Tetanus	40	3	2	2	2	4	1	2	4	6	4	3	7
Toxic-shock syndrome	113	8	12	8	7	10	7	10	10	3	12	8	18
Trichinosis	12	3	—	1	2	1	1	—	1	—	—	—	3
Tuberculosis¶¶	17,531	613	952	1,376	1,529	1,197	1,552	1,602	1,507	1,399	1,454	1,160	3,080
Typhoid fever	346	12	21	34	25	26	24	42	25	36	34	24	44
Varicella (chickenpox)	46,016	4,404	4,598	5,435	3,592	6,949	2,664	1,070	2,498	980	3,036	3,303	7,487
Yellow fever	1	—	—	—	—	—	—	—	—	—	—	1	—

* No cases of anthrax, paralytic poliomyelitis, or human rabies were reported in 1999.
† Total number of acquired immunodeficiency syndrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), through December 31, 1999.
§ Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
¶ Chlamydia refers to genital infections caused by *C. trachomatis*.
** Totals reported to the National Center for Infectious Diseases as of June 30, 2000.
†† Totals reported to the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000.

TABLE 2. Reported cases of notifiable diseases,* by geographic division and area, United States, 1999

Area	Total resident population (in thousands)	AIDS†	Botulism			Brucellosis	Chancroid¶
			Foodborne	Infant	Other§		
United States	**272,692**	**45,104****	**23**	**92**	**39**	**82**	**143**
New England	**13,496**	**2,293**	**—**	**1**	**1**	**3**	**2**
Maine	1,253	80	—	—	—	—	—
N.H.	1,201	46	—	1	—	—	NN
Vt.	594	20	—	—	—	—	NN
Mass.	6,175	1,454	—	—	1	2	1
R.I.	991	107	—	—	—	—	1
Conn.	3,282	586	—	—	—	1	—
Mid. Atlantic	**38,334**	**11,713**	**1**	**24**	**—**	**2**	**39**
Upstate N.Y.	10,827	1,690	1	—	—	2	—
N.Y. City	7,370	6,013	—	1	—	—	39
N.J.	8,143	2,043	—	14	—	—	—
Pa.	11,994	1,967	—	9	—	—	—
E.N. Central	**44,442**	**3,268**	**1**	**2**	**—**	**14**	**4**
Ohio	11,257	547	—	1	—	—	—
Ind.	5,943	363	1	—	—	1	—
Ill.	12,128	1,557	—	—	—	10	NN
Mich.	9,864	649	—	—	—	2	—
Wis.	5,250	152	—	1	—	1	4
W.N. Central	**18,800**	**1,069**	**1**	**5**	**1**	**7**	**1**
Minn.	4,776	190	—	—	—	—	1
Iowa	2,869	87	1	NN	—	6	—
Mo.	5,468	531	—	2	—	1	—
N. Dak.	634	7	—	1	1	—	NN
S. Dak.	733	16	—	1	—	—	—
Nebr.	1,666	67	—	1	—	—	—
Kans.	2,654	171	—	—	—	—	—
S. Atlantic	**49,561**	**12,460**	**4**	**10**	**—**	**3**	**62**
Del.	754	186	—	—	—	—	—
Md.	5,172	1,525	—	3	—	—	—
D.C.	519	838	—	—	—	—	—
Va.	6,873	943	—	3	—	—	3
W. Va.	1,807	69	—	—	—	—	—
N.C.	7,651	794	—	2	—	—	7
S.C.	3,886	959	—	—	—	NN	48
Ga.	7,788	1,678	—	2	—	—	1
Fla.	15,111	5,468	4	—	—	3	3
E.S. Central	**16,584**	**1,933**	**2**	**5**	**—**	**2**	**1**
Ky.	3,961	277	—	3	—	—	—
Tenn.	5,484	759	2	2	—	—	—
Ala.	4,370	476	—	—	—	2	1
Miss.	2,769	421	—	—	—	—	—
W.S. Central	**30,325**	**4,377**	**—**	**6**	**—**	**25**	**25**
Ark.	2,551	194	—	—	—	2	—
La.	4,372	854	—	1	—	—	9
Okla.	3,358	148	—	1	—	—	—
Tex.	20,044	3,181	—	4	—	23	16
Mountain	**17,128**	**1,742**	**—**	**10**	**1**	**6**	**1**
Mont.	883	13	—	1	—	—	—
Idaho	1,252	25	—	1	—	—	—
Wyo.	480	15	—	—	—	—	1
Colo.	4,056	319	—	2	1	4	—
N. Mex.	1,740	93	—	1	—	1	—
Ariz.	4,778	880	—	—	—	1	—
Utah	2,130	155	—	4	—	—	—
Nev.	1,809	242	—	1	—	—	—
Pacific	**44,022**	**6,145**	**14**	**29**	**36**	**20**	**8**
Wash.	5,756	360	7	—	—	—	—
Oreg.	3,316	225	—	3	1	—	1
Calif.	33,145	5,445	4	26	35	18	7
Alaska	620	15	3	—	—	—	—
Hawaii	1,185	100	—	—	—	2	NN
Guam	149	10	—	—	—	—	—
P.R.	3,890	1,247	—	—	—	—	1
V.I.	118	39	NN	NN	NA	NN	—
American Samoa	62	—	NA	NA	NA	NA	NA
C.N.M.I.	67	—	NA	NA	NA	NA	NA

* No cases of anthrax were reported in 1999.
† Total number of acquired immunodeficiency syndrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), through December 31, 1999.
§ Includes cases reported as wound or unspecified botulism.
¶ Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
** Total includes 104 cases among persons with unknown state of residence.

TABLE 2 (*Continued*) Reported cases of notifiable diseases, by geographic division and area, United States, 1999

Area	Chlamydia*	Cholera	Cryptosporidiosis	Cyclosporiasis	Diphtheria	Ehrlichiosis	
						Human granulocytic	Human monocytic
United States	**656,721**	**6**	**2,361**	**56**	**1**	**203**	**99**
New England	**21,224**	**—**	**186**	**7**	**—**	**90**	**—**
Maine	1,220	—	31	—	—	—	—
N.H.	976	—	20	—	—	1	—
Vt.	485	—	36	NN	—	NN	NN
Mass.	8,776	—	71	7	—	9	—
R.I.	2,345	—	6	—	—	7	—
Conn.	7,422	—	22	—	—	73	—
Mid. Atlantic	**66,209**	**1**	**629**	**18**	**—**	**87**	**—**
Upstate N.Y.	NN	—	192	—	—	75	—
N.Y. City	26,766	—	260	18	—	2	—
N.J.	12,424	1	54	—	—	—	—
Pa.	27,019	—	123	—	—	10	—
E.N. Central	**111,571**	**—**	**256**	**1**	**—**	**—**	**—**
Ohio	29,398	—	67	1	—	—	—
Ind.	11,734	—	47	NN	—	NN	NN
Ill.	32,870	—	90	—	—	NN	NN
Mich.	23,107	—	52	—	—	-	—
Wis.	14,462	—	NN	NN	—	NN	NN
W.N. Central	**38,516**	**—**	**217**	**—**	**—**	**4**	**53**
Minn.	7,450	—	91	—	—	—	—
Iowa	5,511	—	56	—	—	—	—
Mo.	13,355	—	26	—	—	3	53
N. Dak.	947	—	20	—	—	—	—
S. Dak.	1,544	—	7	—	—	—	—
Nebr.	3,616	—	15	—	—	—	—
Kans.	6,093	—	2	—	—	1	—
S. Atlantic	**134,306**	**1**	**452**	**28**	**—**	**—**	**21**
Del.	2,761	—	1	—	—	—	—
Md.	13,568	—	17	NN	—	NN	NN
D.C.	NN	—	7	5	—	NN	NN
Va.	13,735	—	30	—	—	—	—
W. Va.	1,820	—	3	3	—	—	—
N.C.	21,812	—	35	—	—	—	12
S.C.	18,499	—	—	—	—	—	—
Ga.	30,368	1	170	10	—	—	1
Fla.	31,743	—	189	10	—	—	8
E.S. Central	**45,514**	**—**	**48**	**—**	**—**	**21**	**—**
Ky.	7,378	—	7	—	—	—	—
Tenn.	14,216	—	13	—	—	21	—
Ala.	12,375	—	16	—	—	NN	NN
Miss.	11,545	—	12	—	—	NN	NN
W.S. Central	**93,653**	**—**	**95**	**—**	**—**	**—**	**23**
Ark.	5,865	—	2	—	—	—	22
La.	16,635	—	24	—	—	NN	NN
Okla.	8,195	—	NN	NN	—	NN	NN
Tex.	62,958	—	69	—	—	—	1
Mountain	**37,430**	**2**	**101**	**2**	**—**	**—**	**1**
Mont.	1,584	—	13	—	—	NN	NN
Idaho	1,778	—	NN	NN	—	NN	NN
Wyo.	787	—	1	—	—	—	—
Colo.	10,848	—	14	2	—	—	—
N. Mex.	5,017	—	44	—	—	NN	NN
Ariz.	12,111	2	16	—	—	—	—
Utah	2,219	—	4	—	—	—	1
Nev.	3,086	—	9	—	—	NN	NN
Pacific	**108,298**	**2**	**377**	**—**	**1**	**1**	**1**
Wash.	11,964	—	NN	—	1	NN	NN
Oreg.	6,127	—	98	—	—	NN	NN
Calif.	85,156	1	279	—	—	1	1
Alaska	1,886	—	—	—	—	NN	NN
Hawaii	3,165	1	—	—	—	NN	NN
Guam	497	—	—	—	—	—	—
P.R.	1,445	—	—	—	—	—	—
V.I.	136	NA	NA	NA	NA	NA	NA
American Samoa	NA	NA	NA	NA	NA	NA	NA
C.N.M.I.	NA	NA	NA	NA	NA	NA	NA

* Chlamydia refers to genital infections caused by *C. trachomatis*. Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.

TABLE 2. (*Continued*) Reported cases of notifiable diseases, by geographic division and area, United States, 1999

Area	Encephalitis: California serogroup viral	Encephalitis: Eastern equine	Encephalitis: St. Louis	Encephalitis: Western equine	*Escherichia coli* O157:H7: NETSS*	*Escherichia coli* O157:H7: PHLIS†	Gonorrhea§
United States	**70**	**5**	**4**	**1**	**4,513**	**2,809**	**360,076**
New England	**—**	**—**	**—**	**—**	**404**	**366**	**6,625**
Maine	—	—	—	—	40	NA	83
N.H.	—	—	—	—	36	34	115
Vt.	—	—	—	—	32	21	52
Mass.	—	—	—	—	177	188	2,453
R.I.	—	—	—	—	27	26	601
Conn.	—	—	—	—	92	97	3,321
Mid. Atlantic	**—**	**—**	**—**	**—**	**1,034**	**239**	**40,973**
Upstate N.Y.	—	—	—	—	939	18	7,616
N.Y. City	—	—	—	—	17	18	12,210
N.J.	—	—	—	—	78	144	7,852
Pa.	—	—	—	—	NN	59	13,295
E.N. Central	**31**	**—**	**—**	**—**	**994**	**532**	**70,056**
Ohio	14	—	—	—	262	219	18,141
Ind.	—	—	—	—	107	67	6,092
Ill.	3	—	—	—	498	92	23,254
Mich.	1	—	—	—	127	85	15,907
Wis.	13	—	—	—	NN	69	6,662
W.N. Central	**6**	**—**	**—**	**1**	**595**	**550**	**16,793**
Minn.	6	—	—	1	175	187	2,830
Iowa	—	—	—	—	114	82	1,365
Mo.	—	—	—	—	47	71	8,187
N. Dak.	—	—	—	—	19	19	83
S. Dak.	—	—	—	—	47	62	192
Nebr.	—	—	—	—	159	113	1,471
Kans.	—	—	—	—	34	16	2,665
S. Atlantic	**28**	**3**	**4**	**—**	**357**	**190**	**104,262**
Del.	—	—	—	—	6	3	1,662
Md.	—	NN	—	—	43	4	10,430
D.C.	—	—	—	—	1	NA	3,536
Va.	—	—	—	—	79	63	9,402
W. Va.	16	—	—	—	16	11	584
N.C.	10	—	—	—	74	53	19,428
S.C.	—	—	—	—	22	14	15,037
Ga.	—	—	—	—	43	3	21,244
Fla.	—	3	4	—	73	39	22,939
E.S. Central	**7**	**—**	**—**	**—**	**142**	**106**	**36,014**
Ky.	1	—	—	—	50	35	3,349
Tenn.	6	—	—	—	55	45	11,366
Ala.	—	—	—	—	28	21	10,888
Miss.	—	—	—	—	9	5	10,411
W.S. Central	**—**	**2**	**—**	**—**	**174**	**174**	**53,346**
Ark.	—	—	—	—	15	14	3,226
La.	—	2	—	—	14	15	13,189
Okla.	—	—	—	—	40	30	4,021
Tex.	—	—	—	—	105	115	32,910
Mountain	**—**	**—**	**—**	**—**	**346**	**245**	**9,535**
Mont.	—	—	—	—	25	NA	53
Idaho	—	—	—	—	78	43	89
Wyo.	—	—	—	—	17	17	43
Colo.	—	—	—	—	115	89	2,526
N. Mex.	—	—	—	—	13	7	974
Ariz.	—	—	—	—	37	24	4,293
Utah	—	—	—	—	36	50	254
Nev.	—	—	—	—	25	15	1,303
Pacific	**—**	**—**	**—**	**—**	**467**	**407**	**22,472**
Wash.	NN	NN	—	—	186	185	2,132
Oreg.	NN	NN	NN	NN	88	69	903
Calif.	—	—	—	—	197	140	18,672
Alaska	NN	NN	NN	NN	1	1	302
Hawaii	—	—	—	NN	15	12	463
Guam	—	—	—	—	NN	NA	59
P.R.	—	—	—	—	9	NA	321
V.I.	NA	NA	NA	NA	NA	NA	51
American Samoa	NA	NA	NA	NA	NN	NA	NA
C.N.M.I.	NA	NA	NA	NA	NN	NA	NA

* National Electronic Telecommunications System for Surveillance.
† Public Health Laboratory Information System. Totals reported to the National Center for Infectious Diseases as of July 18, 2000.
§ Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.

TABLE 2. (*Continued*) Reported cases of notifiable diseases, by geographic division and area, United States, 1999

Area	*Haemophilus influenzae*, invasive disease	Hansen disease (leprosy)	Hantavirus pulmonary syndrome*	Hemolytic uremic syndrome, postdiarrheal	Hepatitis			Legionellosis
					A	B	C; non-A, non-B	
United States	**1,309**	**108**	**33**	**181**	**17,047**	**7,694**	**3,111**	**1,108**
New England	**117**	**1**	**—**	**12**	**373**	**153**	**16**	**91**
Maine	8	—	—	—	27	3	2	3
N.H.	19	—	—	—	18	17	NN	10
Vt.	6	NN	—	1	24	5	7	15
Mass.	41	1	—	—	142	44	4	27
R.I.	9	—	—	1	35	43	3	20
Conn.	34	—	—	10	127	41	—	16
Mid. Atlantic	**210**	**12**	**2**	**38**	**1,211**	**922**	**136**	**273**
Upstate N.Y.	86	—	—	25	293	200	68	74
N.Y. City	57	9	—	7	403	293	—	44
N.J.	59	2	—	6	151	138	—	24
Pa.	8	1	2	—	384	291	68	131
E.N. Central	**212**	**2**	**1**	**12**	**2,940**	**913**	**893**	**279**
Ohio	63	2	—	12	655	95	4	85
Ind.	32	NN	1	NN	105	77	3	52
Ill.	89	—	NN	NN	849	202	48	33
Mich.	20	—	—	—	1,253	509	822	64
Wis.	8	—	—	NN	78	30	16	45
W.N. Central	**92**	**1**	**4**	**23**	**1,133**	**393**	**344**	**71**
Minn.	57	—	—	13	128	80	25	18
Iowa	2	—	2	—	161	44	—	17
Mo.	14	—	—	6	712	227	315	22
N. Dak.	2	NN	—	—	3	2	1	2
S. Dak.	4	—	—	4	10	1	—	6
Nebr.	5	—	NN	NN	53	22	3	6
Kans.	8	1	2	—	66	17	—	—
S. Atlantic	**289**	**4**	**—**	**25**	**2,151**	**1,412**	**184**	**165**
Del.	1	—	—	—	2	1	—	21
Md.	71	1	NN	NN	306	148	22	37
D.C.	5	—	—	—	59	25	1	5
Va.	24	—	NN	3	185	106	11	41
W. Va.	8	—	—	—	47	29	21	NN
N.C.	36	—	NN	10	167	224	33	15
S.C.	6	—	—	—	48	64	22	12
Ga.	80	NN	—	4	482	230	4	5
Fla.	58	3	—	8	855	585	70	29
E.S. Central	**72**	**—**	**—**	**19**	**404**	**473**	**348**	**53**
Ky.	9	—	—	NN	67	50	28	22
Tenn.	40	—	—	8	147	207	123	24
Ala.	18	—	NN	2	62	86	1	5
Miss.	5	—	NN	—	128	130	196	2
W.S. Central	**68**	**24**	**1**	**19**	**3,343**	**1,319**	**713**	**41**
Ark.	2	—	—	—	81	98	31	1
La.	15	3	—	—	213	172	302	11
Okla.	47	1	—	1	533	185	18	7
Tex.	4	20	1	18	2,516	864	362	22
Mountain	**117**	**3**	**14**	**9**	**1,258**	**614**	**237**	**49**
Mont.	3	—	2	—	18	21	5	—
Idaho	2	—	2	2	47	29	8	3
Wyo.	1	—	1	1	9	14	88	—
Colo.	15	1	2	2	219	99	37	14
N. Mex.	19	—	4	1	55	215	34	1
Ariz.	63	—	2	NN	700	138	49	7
Utah	10	—	—	1	64	39	6	18
Nev.	4	2	1	2	146	59	10	6
Pacific	**132**	**61**	**11**	**33**	**4,234**	**1,495**	**240**	**86**
Wash.	9	1	5	NN	505	111	24	22
Oreg.	45	2	NN	4	251	116	23	NN
Calif.	54	35	6	29	3,439	1,234	193	62
Alaska	9	1	—	—	15	18	—	1
Hawaii	15	22	—	—	24	16	—	1
Guam	—	1	—	—	1	4	2	—
P.R.	2	5	—	—	417	307	—	—
V.I.	NA	NA	—	NA	NA	NA	NA	NA
American Samoa	NA	NA	—	NA	NA	NA	NA	NA
C.N.M.I.	NA	NA	-	NA	NA	NA	NA	NA

* Totals reported to the National Center for Infectious Diseases as of June 30, 2000.

TABLE 2. (*Continued*) Reported cases of notifiable diseases, by geographic division and area, United States, 1999

Area	Lyme disease	Malaria	Measles		Meningococcal disease	Mumps	Pertussis	Plague
			Indigenous	Imported*				
United States	**16,273**	**1,666**	**66**	**34**	**2,501**	**387**	**7,288**	**9**
New England	**4,642**	**76**	**5**	**6**	**115**	**9**	**978**	**—**
Maine	41	3	—	—	5	—	33	—
N.H.	27	2	—	1	13	2	116	—
Vt.	26	5	—	—	5	1	96	—
Mass.	787	22	4	4	66	4	649	—
R.I.	546	8	—	—	9	2	49	—
Conn.	3,215	30	1	1	17	—	35	—
Mid. Atlantic	**8,902**	**431**	**—**	**5**	**237**	**46**	**1,319**	**—**
Upstate N.Y.	4,266	78	—	2	80	14	1,020	—
N.Y. City	136	251	—	3	57	12	61	—
N.J.	1,719	57	—	—	52	1	19	—
Pa.	2,781	45	—	—	48	19	219	—
E.N. Central	**586**	**169**	**5**	**5**	**423**	**56**	**743**	**—**
Ohio	47	18	—	—	134	21	322	—
Ind.	21	22	1	1	76	5	90	—
Ill.	17	77	—	2	111	16	140	—
Mich.	11	42	4	2	64	10	74	—
Wis.	490	10	—	—	38	4	117	—
W.N. Central	**407**	**104**	**—**	**1**	**243**	**16**	**571**	**—**
Minn.	283	71	—	1	56	1	281	—
Iowa	24	13	—	—	42	8	111	—
Mo.	72	14	—	—	94	1	75	—
N. Dak.	1	—	—	—	4	1	31	—
S. Dak.	—	—	—	—	11	—	8	—
Nebr.	11	1	—	—	13	1	9	—
Kans.	16	5	—	—	23	4	56	—
S. Atlantic	**1,353**	**395**	**15**	**5**	**446**	**55**	**500**	**—**
Del.	167	2	—	—	10	—	8	—
Md.	899	110	—	—	55	6	124	—
D.C.	6	19	—	—	4	2	1	—
Va.	122	76	15	3	60	11	65	—
W. Va.	20	4	—	—	9	—	6	—
N.C.	74	36	—	—	48	9	104	—
S.C.	6	19	—	—	48	6	27	—
Ga.	—	32	—	—	72	4	52	—
Fla.	59	97	—	2	139	17	113	—
E.S. Central	**102**	**27**	**2**	**—**	**161**	**12**	**118**	**—**
Ky.	19	7	2	—	35	—	49	—
Tenn.	59	9	—	—	65	—	45	—
Ala.	20	7	—	—	38	11	21	NN
Miss.	4	4	—	—	23	1	3	—
W.S. Central	**96**	**128**	**8**	**4**	**260**	**50**	**230**	**—**
Ark.	7	3	5	—	35	—	26	—
La.	9	10	—	—	70	11	9	—
Okla.	8	2	—	—	40	4	43	—
Tex.	72	113	3	4	115	35	152	—
Mountain	**17**	**46**	**2**	**—**	**149**	**27**	**829**	**9**
Mont.	—	4	—	—	5	—	2	—
Idaho	3	3	—	—	14	4	146	—
Wyo.	3	1	—	—	5	—	2	—
Colo.	3	18	—	—	39	6	313	3
N. Mex.	1	4	—	—	16	NN	155	6
Ariz.	3	7	1	—	45	8	139	—
Utah	2	4	—	—	17	4	58	—
Nev.	2	5	1	—	8	5	14	—
Pacific	**168**	**296**	**29**	**8**	**467**	**116**	**2,000**	**—**
Wash.	14	43	4	1	93	2	739	—
Oreg.	15	22	12	—	76	NN	61	—
Calif.	139	218	13	4	280	95	1,144	—
Alaska	—	1	—	—	8	3	5	—
Hawaii	NN	12	—	3	10	16	51	—
Guam	—	1	1	—	1	3	2	—
P.R.	—	3	1	—	15	1	14	—
V.I.	NA	NA	NA	NA	NA	NA	NA	NA
American Samoa	NA	NA	NA	NA	NA	NA	NA	NA
C.N.M.I.	NA	NA	NA	NA	NA	NA	NA	NA

* Imported cases include only those resulting from importation from other countries.

TABLE 2. (*Continued*) Reported cases of notifiable diseases,* by geographic division and area, United States, 1999

Area	Psittacosis	Rabies, Animal	RMSF†	Rubella	Rubella, Congenital syndrome	Salmonellosis, NETSS§	Salmonellosis, PHLIS¶
United States	**16**	**6,730**	**579**	**267**	**9**	**40,596**	**32,782**
New England	**—**	**919**	**6**	**7**	**—**	**2,237**	**2,250**
Maine	—	200	—	—	—	132	104
N.H.	—	47	—	—	—	141	137
Vt.	—	92	—	—	NN	93	82
Mass.	—	226	2	7	—	1,206	1,229
R.I.	—	101	4	—	—	151	169
Conn.	NN	253	—	—	—	512	529
Mid. Atlantic	**4**	**1,305**	**39**	**35**	**2**	**5,834**	**5,280**
Upstate N.Y.	1	919	14	21	—	1,516	1,363
N.Y. City	1	NA	—	6	2	1,457	1,527
N.J.	1	180	7	5	—	1,199	1,119
Pa.	1	206	18	3	—	1,462	1,271
E.N. Central	**2**	**172**	**32**	**2**	**—**	**5,432**	**4,690**
Ohio	1	36	8	—	—	1,313	1,093
Ind.	1	13	12	1	—	572	479
Ill.	—	10	7	1	—	1,600	1,568
Mich.	—	92	5	—	—	973	968
Wis.	—	21	—	—	—	974	582
W.N. Central	**—**	**746**	**33**	**140**	**—**	**2,349**	**2,410**
Minn.	—	120	1	5	—	626	710
Iowa	—	159	1	30	—	260	232
Mo.	—	31	16	2	—	758	881
N. Dak.	—	147	—	—	—	58	62
S. Dak.	—	180	4	—	—	100	118
Nebr.	—	4	9	103	—	214	180
Kans.	—	105	2	—	—	333	227
S. Atlantic	**3**	**2,172**	**279**	**39**	**—**	**9,742**	**6,489**
Del.	—	58	—	—	—	179	160
Md.	1	394	33	1	—	860	888
D.C.	—	—	—	—	—	76	NA
Va.	—	581	20	—	—	1,286	1,036
W. Va.	—	115	1	—	—	189	154
N.C.	1	442	152	37	—	1,331	1,311
S.C.	—	149	52	—	—	702	530
Ga.	—	247	14	—	—	1,976	1,701
Fla.	1	186	7	1	—	3,143	709
E.S. Central	**1**	**256**	**99**	**2**	**—**	**2,239**	**1,481**
Ky.	—	35	3	—	—	419	294
Tenn.	—	95	66	—	—	593	597
Ala.	1	124	17	2	—	605	491
Miss.	—	2	14	—	—	622	99
W.S. Central	**—**	**524**	**66**	**22**	**—**	**4,088**	**2,807**
Ark.	—	31	25	12	—	698	265
La.	—	—	2	—	—	726	617
Okla.	NN	94	29	1	—	466	352
Tex.	NN	399	10	9	—	2,198	1,573
Mountain	**3**	**272**	**19**	**16**	**5**	**3,071**	**2,615**
Mont.	—	64	2	—	—	86	2
Idaho	—	6	—	—	—	135	97
Wyo.	1	45	5	—	—	70	59
Colo.	2	51	4	1	1	720	708
N. Mex.	—	9	1	—	1	370	293
Ariz.	—	81	1	13	2	924	820
Utah	—	8	5	1	1	566	587
Nev.	—	8	1	1	—	200	49
Pacific	**3**	**364**	**6**	**4**	**2**	**5,804**	**4,760**
Wash.	—	—	3	—	—	792	848
Oreg.	—	4	2	—	—	426	477
Calif.	3	351	1	4	2	4,193	3,111
Alaska	—	9	NN	—	NN	55	35
Hawaii	—	—	NN	—	—	338	289
Guam	—	—	—	—	—	37	NA
P.R.	—	74	—	2	—	715	NA
V.I.	NA	NA	NA	NA	NA	NA	NA
American Samoa	NA	NA	NA	NA	NA	NA	NA
C.N.M.I.	NA	NA	NA	NA	NA	NA	NA

* No cases of paralytic poliomyelitis or human rabies were reported in 1999.
† Rocky Mountain spotted fever.
§ National Electronic Telecommunications System for Surveillance.
¶ Public Health Laboratory Information System. Totals reported to the National Center for Infectious Diseases as of May 4, 2000.

TABLE 2. (*Continued*) Reported cases of notifiable diseases, by geographic division and area, United States, 1999

Area	Shigellosis NETSS*	Shigellosis PHLIS†	Streptococcal disease, invasive, group A	*Streptococcus pneumoniae*, drug resistant	Streptococcal toxic-shock syndrome	Syphilis§ Congenital (age <1 yr)	Syphilis§ Primary & secondary
United States	**17,521**	**10,084**	**2,382**	**4,618**	**61**	**556**	**6,657**
New England	**885**	**851**	**81**	**14**	**1**	**2**	**60**
Maine	5	—	9	—	—	—	—
N.H.	19	17	17	NN	—	1	1
Vt.	7	4	14	14	1	—	3
Mass.	748	731	26	NN	—	—	37
R.I.	37	29	15	—	—	—	3
Conn.	69	70	—	—	NN	1	16
Mid. Atlantic	**1,188**	**750**	**410**	**152**	**4**	**96**	**302**
Upstate N.Y.	314	84	245	150	NN	2	20
N.Y. City	353	247	118	NA	—	41	130
N.J.	297	236	29	—	3	46	68
Pa.	224	183	18	2	1	7	84
E.N. Central	**3,300**	**1,853**	**638**	**197**	**43**	**98**	**1,254**
Ohio	422	150	149	—	14	6	92
Ind.	368	118	37	197	2	7	450
Ill.	1,330	1,018	246	NN	27	53	422
Mich.	535	489	206	NN	—	20	249
Wis.	645	78	NN	NN	NN	7	41
W.N. Central	**1,246**	**806**	**252**	**626**	**3**	**10**	**135**
Minn.	254	254	182	609	—	—	10
Iowa	74	62	—	NN	—	—	9
Mo.	721	353	45	—	—	9	96
N. Dak.	3	2	8	5	—	—	—
S. Dak.	18	10	11	3	—	1	—
Nebr.	87	68	—	—	—	—	6
Kans.	89	57	6	9	3	—	14
S. Atlantic	**2,702**	**534**	**334**	**1,708**	**4**	**115**	**2,102**
Del.	15	11	—	10	—	—	10
Md.	162	58	NN	NN	NN	27	343
D.C.	53	NA	11	45	NN	—	45
Va.	136	66	36	NN	—	3	153
W. Va.	9	5	27	31	—	—	5
N.C.	211	93	48	NN	—	19	464
S.C.	122	64	5	356	—	19	269
Ga.	284	83	112	555	—	15	430
Fla.	1,710	154	95	711	4	32	383
E.S. Central	**1,223**	**699**	**85**	**318**	**5**	**25**	**1,138**
Ky.	235	149	28	—	—	—	101
Tenn.	691	476	59	318	5	7	641
Ala.	117	63	—	—	—	6	202
Miss.	180	11	NN	NN	NN	12	194
W.S. Central	**3,143**	**1,212**	**243**	**1,558**	**—**	**102**	**1,053**
Ark.	76	27	8	30	—	14	87
La.	228	137	1	116	NN	12	306
Okla.	560	171	NN	NN	NN	8	187
Tex.	2,281	877	234	1,412	—	68	473
Mountain	**1,164**	**773**	**311**	**44**	**1**	**25**	**241**
Mont.	10	—	—	—	NN	—	1
Idaho	28	12	7	NN	—	—	1
Wyo.	3	1	2	8	—	—	—
Colo.	205	164	—	6	—	1	8
N. Mex.	152	109	41	20	—	—	12
Ariz.	602	413	260	—	—	24	212
Utah	66	68	NN	NN	1	—	2
Nev.	98	6	1	10	—	—	5
Pacific	**2,670**	**2,606**	**28**	**1**	**—**	**88**	**372**
Wash.	172	116	NN	NN	—	—	77
Oreg.	95	91	NN	NN	NN	—	8
Calif.	2,364	2,358	NN	—	NN	88	283
Alaska	4	5	—	—	—	—	1
Hawaii	35	36	28	1	—	—	3
Guam	19	NA	3	—	—	—	2
P.R.	141	NA	—	—	—	17	146
V.I.	NA	NA	NA	NA	NN	—	1
American Samoa	NA	NA	NA	NA	NA	NA	NA
C.N.M.I.	NA	NA	NA	NA	NA	NA	NA

* National Electronic Telecommunications System for Surveillance.
† Public Health Laboratory Information System. Totals reported to the National Center for Infectious Diseases as of April 17, 2000.
§ Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.

TABLE 2. (*Continued*) Reported cases of notifiable diseases, by geographic division and area, United States, 1999

Area	Syphilis* All stages	Tetanus	Toxic-shock syndrome	Trichinosis	Tuberculosis†	Typhoid fever	Varicella§ (chickenpox)	Yellow fever
United States	**35,628**	**40**	**113**	**12**	**17,531**	**346**	**46,016**	**1**
New England	**587**	**—**	**7**	**1**	**489**	**28**	**497**	**—**
Maine	1	—	2	—	23	—	45	—
N.H.	17	—	2	—	19	—	NN	NN
Vt.	3	—	—	—	3	1	NN	—
Mass.	385	—	3	—	270	17	427	—
R.I.	55	—	—	—	53	3	25	—
Conn.	126	—	NN	1	121	7	NN	—
Mid. Atlantic	**5,826**	**5**	**13**	**3**	**2,862**	**100**	**—**	**—**
Upstate N.Y.	357	4	6	3	377	15	NN	—
N.Y. City	3,737	—	2	—	1,460	49	NN	—
N.J.	800	—	—	—	571	35	NN	—
Pa.	932	1	5	—	454	1	NN	—
E.N. Central	**4,101**	**4**	**35**	**3**	**1,753**	**41**	**28,004**	**—**
Ohio	364	2	4	—	317	4	1,307	—
Ind.	802	2	2	—	150	6	NN	—
Ill.	1,967	—	5	2	825	17	13,846	—
Mich.	778	—	17	—	351	14	12,260	—
Wis.	190	—	7	1	110	—	591	—
W.N. Central	**625**	**3**	**13**	**1**	**582**	**3**	**5,297**	**—**
Minn.	71	1	2	—	201	1	NN	—
Iowa	37	—	4	—	98	1	NN	—
Mo.	395	1	3	—	208	—	5,291	—
N. Dak.	—	—	—	—	7	—	5	—
S. Dak.	3	—	—	—	21	—	NN	—
Nebr.	24	—	2	—	18	—	1	—
Kans.	95	1	2	1	69	1	NN	—
S. Atlantic	**10,220**	**5**	**8**	**1**	**3,518**	**57**	**3,565**	**—**
Del.	72	—	—	—	34	2	5	—
Md.	1,385	—	NN	—	294	9	NN	NN
D.C.	458	—	—	—	70	—	75	—
Va.	722	—	—	—	334	11	1,490	—
W. Va.	15	—	—	—	41	—	1,995	—
N.C.	1,713	2	1	—	488	3	NN	—
S.C.	925	—	2	—	315	3	NN	—
Ga.	1,973	—	2	—	665	5	NN	—
Fla.	2,957	3	3	1	1,277	24	NN	—
E.S. Central	**3,960**	**—**	**7**	**—**	**1,120**	**2**	**584**	**—**
Ky.	302	—	3	NN	209	1	NN	—
Tenn.	1,734	—	4	—	382	1	584	—
Ala.	1,018	—	—	—	314	—	NN	—
Miss.	906	—	NN	—	215	—	NN	—
W.S. Central	**6,024**	**6**	**2**	**—**	**2,395**	**24**	**7,646**	**—**
Ark.	364	—	—	NN	181	1	NN	—
La.	1,423	—	—	—	357	—	173	—
Okla.	538	—	2	NN	208	—	NN	—
Tex.	3,699	6	NN	—	1,649	23	7,473	—
Mountain	**1,161**	**—**	**4**	**1**	**580**	**7**	**423**	**—**
Mont.	3	—	—	—	14	—	NN	—
Idaho	13	—	—	—	16	—	NN	—
Wyo.	—	—	1	—	3	—	NN	—
Colo.	91	—	—	1	88	2	NN	—
N. Mex.	80	—	2	—	64	—	NN	—
Ariz.	833	—	—	—	262	2	245	—
Utah	49	—	1	—	40	2	136	—
Nev.	92	—	—	—	93	1	42	NN
Pacific	**3,124**	**17**	**24**	**2**	**4,232**	**84**	**—**	**1**
Wash.	204	—	5	—	258	8	NN	—
Oreg.	37	1	NN	—	123	5	NN	—
Calif.	2,859	16	19	2	3,606	71	NN	1
Alaska	13	—	NN	—	61	—	NN	—
Hawaii	11	—	NN	—	184	—	NN	—
Guam	12	—	—	—	69	—	210	—
P.R.	1,457	2	—	—	200	—	5,019	—
V.I.	13	NA	NA	NA	NA	NA	NA	NA
American Samoa	NA	NA	NA	NA	4	NA	NA	NA
C.N.M.I.	NA	NA	NA	NA	66	NA	NA	NA

* Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
† Totals reported to the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000.
§ Although not nationally notifiable, reporting is recommended by the Council for State and Territorial Epidemiologists.

TABLE 3. Reported cases and incidence rates of notifiable diseases,* by age group, United States, 1999

Disease	Total	<1 yrs No.	<1 yrs (Rate)	1–4 yrs No.	1–4 yrs (Rate)	5–14 yrs No.	5–14 yrs (Rate)	15–24 yrs No.	15–24 yrs (Rate)	25–39 yrs No.	25–39 yrs (Rate)	40–64 yrs No.	40–64 yrs (Rate)	≥65 yrs No.	≥65 yrs (Rate)	Age not stated
AIDS†	45,104	88	2.31	89	0.59	135	0.34	1,700	4.51	23,291	38.57	19,083	(23.45)	718	2.08	—
Botulism, foodborne	23	7	0.18	—	0.00	—	—	1	0.00	2	0.00	10	0.01	3	0.01	1
Infant	92	89	2.36	1	0.01	1	0.00	—	—	—	—	—	—	—	—	—
Other (includes wound)	29	1	0.03	—	0.00	—	—	1	0.00	18	0.03	18	0.02	1	0.00	1
Brucellosis	82	1	0.03	1	0.01	12	0.03	15	0.04	13	0.02	29	0.04	10	0.03	1
Chlamydia¶	655,335	NA	NA	NA	NA	NA	NA	480,196	(1,273.72)	138,422	(229.24)	13,036	(16.02)	899	2.60	7,004
Cholera	6	—	—	1	0.01	1	0.00	3	0.00	—	—	1	0.00	2	0.01	—
Cryptosporidiosis	2,361	51	1.42	432	3.03	398	0.91	205	0.56	710	1.24	492	0.64	108	0.33	25
Cyclosporiasis	90	4	0.11	3	0.02	3	0.01	11	0.03	6	0.01	23	0.03	5	0.02	1
Diphtheria	1	—	—	—	—	—	—	—	—	—	—	—	—	1	0.00	—
Ehrlichiosis, Human granulocytic	203	1	0.03	4	0.03	8	0.03	10	0.03	46	0.10	77	0.12	56	0.21	1
Human monocytic	99	2	0.07	—	—	3	0.01	4	0.01	16	0.03	49	0.08	22	0.08	3
Encephalitis, California serogroup viral	70	2	0.05	12	0.08	46	0.12	4	0.01	1	0.00	3	0.00	2	0.01	—
Eastern equine	5	—	—	—	—	2	0.01	1	0.00	—	—	2	0.00	—	—	—
St. Louis	4	—	—	—	—	—	—	—	—	1	0.00	2	0.00	1	0.00	—
Western equine	1	—	—	—	—	—	—	—	—	—	—	—	—	1	0.00	—
Escherichia coli O157:H7	4,513	99	2.75	792	5.56	915	2.47	593	1.67	609	1.07	875	1.15	392	1.23	238
Gonorrhea†	359,442	NA	NA	NA	NA	NA	NA	210,892	559.39	110,680	(183.29)	26,402	(32.44)	894	2.59	3,612
Haemophilus influenzae, invasive disease	1,309	149	3.91	105	0.70	59	0.15	57	0.15	110	0.18	305	0.37	504	1.46	20
Hansen disease (leprosy)	108	—	—	—	—	2	0.01	7	0.02	29	0.05	29	0.04	17	0.05	24
Hantavirus pulmonary syndrome**	33	—	—	—	—	3	0.01	3	0.01	12	0.02	12	0.01	3	0.01	—
Hemolytic uremic syndrome, postdiarrheal	181	5	0.16	92	0.73	42	0.13	8	0.03	6	0.01	11	0.02	17	0.06	—
Hepatitis A	17,047	85	2.23	868	5.88	3,546	9.00	2,768	7.34	5,248	8.69	3,503	4.30	877	2.54	134
Hepatitis B	7,894	33	0.87	30	0.20	73	0.19	1,311	3.46	3,375	5.59	2,395	2.94	333	0.96	144
Hepatitis C; non-A, non-B	3,111	29	0.76	7	0.05	16	0.04	182	0.48	960	1.62	1,654	2.03	164	0.48	79
Legionellosis	1,108	3	0.08	1	0.01	5	0.01	25	0.07	120	0.20	503	0.63	440	1.30	11
Lyme disease	16,273	33	0.87	870	5.79	3,160	8.05	1,410	3.76	2,722	4.53	5,837	7.20	2,100	6.11	141
Malaria	1,666	7	0.18	76	0.50	155	0.39	315	0.84	600	0.99	438	0.54	47	0.14	28
Measles	100	17	0.45	24	0.16	21	0.05	12	0.03	20	0.03	5	0.01	—	—	1
Meningococcal disease	2,501	354	9.29	364	2.41	222	0.82	467	1.24	222	0.37	379	0.47	375	1.09	18
Mumps	387	4	0.11	61	0.41	156	0.40	42	0.11	62	0.10	44	0.06	7	0.02	11
Pertussis (whooping cough)	7,288	2,168	56.87	833	5.52	2,056	5.22	883	2.34	579	0.96	674	0.83	80	0.23	15
Plague	9	—	—	—	—	1	0.00	—	—	1	0.00	3	0.00	4	0.01	—
Psittacosis	16	—	—	—	—	—	—	—	—	2	0.00	10	0.01	3	0.01	1
Rocky Mountain spotted fever	579	1	0.03	38	0.25	89	0.23	57	0.15	124	0.21	200	0.25	66	0.19	4
Rubella	267	16	0.42	15	0.10	4	0.01	111	0.29	97	0.16	20	0.02	1	0.00	3
Salmonellosis	40,596	5,163	(135.44)	6,662	(44.27)	4,963	(12.59)	3,472	9.21	5,505	9.12	6,280	7.72	3,580	(10.37)	4,961
Shigellosis	17,521	370	9.71	4,667	(30.92)	4,619	(11.72)	1,228	3.26	2,397	3.97	1,322	1.62	327	0.95	2,591
Streptococcal disease, invasive, group A	2,382	102	3.49	142	1.23	184	0.61	132	0.46	339	0.73	732	1.15	726	2.64	25
Streptococcus pneumoniae, drug-resistant, invasive	4,618	715	26.81	1,232	(11.66)	153	0.56	95	0.36	363	0.87	878	1.56	1,062	4.39	120
Streptococcal toxic-shock syndrome	61	—	—	—	—	10	0.03	6	0.02	15	0.03	23	0.04	7	0.03	—
Syphilis Primary and secondary¶	6,650	NA	NA	NA	NA	NA	NA	1,410	3.74	3,239	5.36	1,793	2.20	74	0.21	17
Tetanus	40	—	—	1	0.01	1	0.00	3	0.01	14	0.02	12	0.01	9	0.03	—
Toxic-shock syndrome	113	2	0.06	2	0.02	17	0.05	19	0.06	35	0.07	30	0.04	9	0.03	—
Trichinosis	12	—	—	—	—	—	—	4	0.01	4	0.01	1	0.00	3	0.01	—
Tuberculosis††	17,531	98	2.57	507	3.36	439	1.11	1,516	4.02	4,398	7.27	6,552	8.05	4,026	(11.67)	3
Typhoid fever	345	1	0.03	46	0.30	74	0.19	73	0.19	86	0.15	51	0.06	12	0.03	1
Yellow fever	1	—	—	—	—	—	—	—	—	—	—	1	0.00	—	—	—

* No cases of anthrax, paralytic poliomyelitis, or human rabies were reported in 1999.
† Total number of acquired immunodeficiency syndrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), through December 31, 1999.
§ Chlamydia refers to genital infections caused by *C. trachomatis*.
¶ Age-related data are collected on aggregate forms different from those used for reported cases. Thus, the total cases reported on this table will differ slightly from others. Cases among persons aged <15 years are not shown because some might not be caused by sexual transmission. However, these cases are included in the totals. Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
** Totals reported to the National Center for Infectious Diseases as of June 30, 2000.
†† Totals reported to the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000.
Note: Rates <0.01 after rounding are listed as 0.00.

TABLE 4. Reported cases and incidence rates of notifiable diseases,* by sex, United States, 1999

Disease	Total	Male		Female		Sex not stated
		No.	(Rate)	No.	(Rate)	
AIDS†	46,104	34,532	(25.95)	10,572	(7.59)	—
Botulism, foodborne	23	12	(0.01)	11	(0.01)	—
Infant	92	44	(1.15)	45	(1.23)	3
Other (includes wound)	39	26	(0.02)	13	(0.01)	—
Brucellosis	82	58	(0.04)	24	(0.02)	—
Chancroid§	143	91	(0.07)	51	(0.04)	1
Chlamydia¶¶	656,721	NA	(NA)	534,612	(400.99)	2,331
Cholera	6	4	(0.00)	2	(0.00)	—
Cryptosporidiosis	2,361	1,419	(1.13)	930	(0.71)	12
Cyclosporiasis	56	29	(0.02)	27	(0.02)	—
Diphtheria	1	1	(0.00)	—	(—)	—
Ehrlichiosis, human granulocytic	203	113	(0.11)	90	(0.08)	—
Human monocytic	99	69	(0.07)	30	(0.03)	—
Encephalitis, California serogroup viral	70	48	(0.04)	22	(0.02)	—
Eastern equine	5	3	(0.00)	2	(0.00)	—
St. Louis	4	4	(0.00)	—	(—)	—
Western equine	1	1	(0.00)	—	(—)	—
Escherichia coli 0157:H7	4,513	2,053	(1.65)	2,329	(1.79)	131
Gonorrhea§	360,076	179,564	(134.92)	179,534	(128.94)	978
Haemophilus influenzae, invasive disease	1,309	614	(0.46)	684	(0.49)	11
Hansen disease (leprosy)	108	65	(0.05)	21	(0.02)	22
Hantavirus pulmonary syndrome**	33	20	(0.02)	13	(0.01)	—
Hemolytic uremic syndrome, postdiarrheal	181	73	(0.07)	106	(0.09)	2
Hepatitis A	17,047	10,286	(7.73)	6,653	(4.78)	108
Hepatitis B	7,694	4,532	(3.41)	3,095	(2.22)	67
Hepatitis C; non-A, non-B	3,111	1,889	(1.42)	1,179	(0.85)	43
Legionellosis	1,108	666	(0.51)	436	(0.32)	6
Lyme disease	16,273	8,511	(6.42)	7,715	(5.56)	47
Malaria	1,666	1,063	(0.80)	570	(0.41)	33
Measles	100	46	(0.03)	54	(0.04)	—
Meningococcal disease	2,501	1,223	(0.92)	1,254	(0.90)	24
Mumps	387	191	(0.15)	188	(0.14)	8
Pertussis (whooping cough)	7,288	3,341	(2.51)	3,931	(2.82)	16
Plague	9	4	(0.00)	5	(0.00)	—
Psittacosis	16	5	(0.00)	11	(0.01)	—
Rocky Mountain spotted fever	579	331	(0.25)	245	(0.18)	3
Rubella	267	171	(0.13)	93	(0.07)	3
Salmonellosis	40,596	17,310	(13.01)	18,477	(13.27)	4,809
Shigellosis	17,521	6,793	(5.10)	8,082	(5.80)	2,646
Streptococcal disease, invasive, group A	2,382	1,199	(1.16)	1,097	(1.01)	86
Streptococcus pneumoniae, drug-resistant, invasive disease	4,618	2,288	(2.47)	1,985	(2.05)	345
Streptococcal toxic-shock syndrome	61	27	(0.03)	34	(0.03)	—
Syphilis, primary and secondary§	6,857	3,856	(2.90)	2,796	(2.01)	5
Tetanus	40	29	(0.02)	11	(0.01)	—
Toxic-shock syndrome	113	25	(0.02)	88	(0.07)	—
Trichinosis	12	10	(0.01)	2	(0.00)	—
Tuberculosis††	17,531	10,948	(8.23)	6,582	(4.73)	1
Typhoid fever	346	159	(0.12)	180	(0.13)	7
Yellow fever	1	1	(0.00)	—	(—)	—

* No cases of anthrax, paralytic poliomyelitis, or human rabies were reported in 1999.
† Total number of acquired immunodeficiency sydrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), through December 31, 1999.
§ Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
¶ Chlamydia refers to genital infections caused by *C. trachomatis*.
** Totals reported to the National Center for Infectious Diseases as of June 30, 2000.
†† Totals reported to the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000.
Note: Rates <0.01 after rounding are listed as 0.00.

TABLE 5. Reported cases and incidence rates of notifiable diseases,* by race, United States, 1999

Disease	Total	American Indian or Alaska Native		Asian or Pacific Islander		Black		White		Other	Race not stated
		No.	(Rate)	No.	(Rate)	No.	(Rate)	No.	(Rate)	No.	No.
AIDS†	45,104	178	(7.42)	361	(3.34)	21,877	(62.75)	14,805	(6.59)	—	7,883§
Botulism, foodborne	23	2	(0.08)	2	(0.02)	—	(—)	17	(0.01)	1	1
Infant	92	1	(2.35)	3	(1.65)	2	(0.35)	54	(1.78)	—	32
Other (includes wound)	39	—	(—)	—	(—)	3	(0.01)	17	(0.01)	—	19
Brucellosis	82	—	(—)	—	(—)	—	(—)	47	(0.02)	1	34
Chlamydia¶**	656,336	8,748	(364.81)	9,121	(84.29)	228,126	(654.37)	136,881	(60.94)	—	272,461§
Cholera	6	—	(—)	2	(0.02)	1	(0.00)	—	(—)	—	3
Cryptosporidiosis	2,361	5	(0.26)	31	(0.30)	289	(0.85)	1,312	(0.62)	3	721
Cyclosporiasis	56	—	(—)	1	(0.01)	6	(0.02)	34	(0.02)	—	15
Diphtheria	1	—	(—)	—	(—)	—	(—)	1	(0.00)	—	—
Ehrlichiosis,											
Human granulocytic	203	3	(0.21)	2	(0.02)	—	(—)	134	(0.08)	—	64
Human monocytic	99	—	(—)	—	(—)	5	(0.02)	66	(0.04)	—	28
Encephalitis, California serogroup viral	70	3	(0.14)	—	(—)	1	(0.00)	61	(0.03)	—	5
Eastern equine	5	—	(—)	—	(—)	1	(0.00)	4	(0.00)	—	—
St. Louis	4	—	(—)	—	(—)	—	(—)	4	(0.00)	—	—
Western equine	1	—	(—)	—	(—)	—	(—)	—	(—)	—	1
Escherichia coli 0157:H7	4,513	10	(0.43)	33	(0.31)	97	(0.29)	2,265	(1.08)	6	2,102
Gonorrhea**	358,442	1,719	(71.70)	1,662	(15.36)	220,581	(632.72)	40,896	(18.21)	—	94,584
Haemophilus influenzae, invasive disease	1,309	33	(1.38)	17	(0.16)	179	(0.51)	767	(0.34)	1	312
Hansen disease (leprosy)	108	—	(—)	27	(0.25)	9	(0.03)	26	(0.01)	—	46
Hantavirus pulmonary syndrome††	33	4	(0.17)	1	(0.01)	—	(—)	28	(0.01)	—	—
Hemolytic uremic syndrome, postdiarrheal	181	—	(—)	3	(0.03)	8	(0.03)	134	(0.07)	1	35
Hepatitis A	17,047	177	(7.38)	279	(2.58)	1,915	(5.49)	9,246	(4.12)	58	5,372
Hepatitis B	7,694	83	(3.46)	431	(3.98)	1,540	(4.42)	3,075	(1.37)	30	2,535
Hepatitis C; non-A, non-B	3,111	4	(0.17)	4	(0.04)	41	(0.12)	145	(0.06)	—	2,917
Legionellosis	1,108	2	(0.09)	6	(0.06)	117	(0.34)	727	(0.34)	8	248
Lyme disease	16,273	23	(0.96)	86	(0.85)	192	(0.55)	12,481	(5.57)	39	3,452
Malaria	1,666	3	(0.13)	107	(0.99)	706	(2.03)	403	(0.18)	24	423
Measles	100	1	(0.04)	15	(0.14)	9	(0.03)	62	(0.03)	2	11
Meningococcal disease	2,501	27	(1.13)	36	(0.33)	372	(1.07)	1,547	(0.69)	6	513
Mumps	387	9	(0.41)	26	(0.24)	32	(0.09)	191	(0.09)	3	126
Pertussis (whooping cough)	7,288	55	(2.29)	109	(1.01)	397	(1.14)	5,003	(2.23)	37	1,687
Plague	9	2	(0.08)	—	(—)	—	(—)	7	(0.00)	—	—
Psittacosis	16	—	(—)	—	(—)	1	(0.00)	11	(0.01)	—	4
Rocky Mountain spotted fever	579	9	(0.39)	3	(0.03)	31	(0.09)	449	(0.20)	—	87
Rubella	267	—	(—)	3	(0.03)	3	(0.01)	194	(0.09)	—	67
Rubella, congenital syndrome	9	—	(—)	1	(0.01)	—	(—)	3	(0.00)	1	4
Salmonellosis	40,596	264	(11.01)	561	(5.18)	3,282	(9.41)	19,504	(8.68)	96	16,889
Shigellosis	17,521	220	(9.18)	143	(1.32)	2,417	(6.93)	7,333	(3.26)	129	7,279
Streptococcal disease, invasive, group A	2,382	56	(3.57)	24	(0.41)	339	(1.17)	1,364	(0.78)	2	597
Streptococcus pneumoniae, drug-resistant, invasive disease	4,618	11	(0.69)	24	(0.29)	581	(2.48)	1,736	(1.11)	6	2,260
Streptococcal toxic-shock syndrome	61	—	(—)	—	(—)	8	(0.03)	48	(0.03)	—	5
Syphilis, primary and secondary**	6,650	54	(2.25)	41	(0.38)	4,854	(1 3.92)	1,008	(0.45)	—	693§
Tetanus	40	—	(—)	1	(0.01)	3	(0.01)	25	(0.01)	—	11
Toxic-shock syndrome	113	—	(—)	5	(0.06)	3	(0.01)	91	(0.05)	—	14
Trichinosis	12	—	(—)	—	(—)	1	(0.00)	10	(0.00)	—	1
Tuberculosis§§	17,531	253	(10.55)	3,639	(33.63)	5,666	(16.25)	7,913	(3.52)	—	60
Typhoid fever	346	—	(—)	99	(0.91)	18	(0.05)	65	(0.03)	15	149
Yellow fever	1	—	(—)	—	(—)	—	(—)	1	(0.00)	—	—

* No cases of anthrax, paralytic poliomyelitis, or human rabies were reported in 1999.
† Total number of acquired immunodeficiency syndrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), through December 31, 1999.
§ Includes the following cases originally reported as Hispanic: 7,764 for AIDS; 81,708 for chlamydia; 17,170 for gonorrhea; and 527 for syphilis, primary and secondary.
¶ Chlamydia refers to genital infections caused by *C. trachomatis*.
** In addition to data collected through the National Electronic Telecommunications System for Surveillance (NETSS), some data concerning ethnicity are collected on aggregate forms different from those used for reported cases. Thus, the total number of cases reported on this table can differ slightly from others. Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
†† Totals reported to the National Center for Infectious Diseases as of June 30, 2000.
§§ Totals reported to the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000.
Note: Rates <0.01 after rounding are listed as 0.00.

TABLE 6. Reported cases and incidence rates of notifiable diseases,* by ethnicity, United States, 1999

Disease	Total	Hispanic		Non-Hispanic		Ethnicity not stated
		No.	(Rate)	No.	(Rate)	
AIDS†	45,104	7,764	(24.78)	36,682	(15.20)	658
Botulism, foodborne	23	1	(0.00)	18	(0.01)	4
Infant	92	16	(2.22)	46	(1.48)	30
Other (includes wound)	39	13	(0.04)	19	(0.01)	7
Brucellosis	82	47	(0.15)	14	(0.01)	21
Chlamydia§¶	655,335	81,708	(260.74)	365,007	(151.23)	208,620
Cholera	6	—	(—)	4	(0.00)	2
Cryptosporidiosis	2,361	208	(0.68)	1,154	(0.51)	999
Cyclosporiasis	56	5	(0.02)	29	(0.01)	22
Diphtheria	1	—	(—)	1	(0.00)	—
Ehrlichiosis						
Human granulocytic	203	3	(0.01)	141	(0.08)	59
Human monocytic	99	3	(0.01)	67	(0.04)	29
Encephalitis, California serogroup viral	70	—	(—)	36	(0.02)	34
Eastern equine	5	—	(—)	3	(0.00)	2
St. Louis	4	—	(—)	4	(0.00)	—
Western equine	1	—	(—)	—	(0.00)	1
Escherichia coli 0157:H7	4,513	110	(0.36)	1,788	(0.80)	2,615
Gonorrhea¶	359,442	17,170	(54.79)	261,477	(108.34)	80,795
Haemophilus influenzae, invasive disease	1,309	90	(0.29)	648	(0.27)	571
Hansen disease (leprosy)	108	33	(0.11)	40	(0.02)	35
Hantavirus pulmonary syndrome**	33	2	(0.01)	15	(0.01)	16
Hemolytic uremic syndrome, postdiarrheal	181	18	(0.06)	117	(0.06)	46
Hepatitis A	17,047	3,949	(12.60)	7,243	(3.00)	5,855
Hepatitis B	7,694	693	(2.21)	4,030	(1.67)	2,971
Hepatitis C; non-A, non-B	3,111	23	(0.07)	111	(0.05)	2,977
Legionellosis	1,108	25	(0.08)	591	(0.25)	492
Lyme disease	16,273	181	(0.58)	7,613	(3.17)	8,479
Malaria	1,666	188	(0.60)	916	(0.38)	562
Measles	100	11	(0.04)	84	(0.03)	5
Meningococcal disease	2,501	227	(0.72)	1,384	(0.57)	890
Mumps	387	75	(0.25)	181	(0.08)	131
Pertussis (whooping cough)	7,288	935	(2.98)	4,768	(1.98)	1,585
Plague	9	1	(0.00)	7	(0.00)	1
Psittacosis	16	—	(—)	7	(0.00)	9
Rocky Mountain spotted fever	579	7	(0.02)	378	(0.16)	194
Rubella	267	183	(0.58)	53	(0.02)	31
Rubella, congenital syndrome	9	7	(0.02)	—	(—)	2
Salmoneliosis	40,596	2,498	(7.97)	15,684	(6.50)	22,414
Shigellosis	17,521	2,998	(9.57)	6,181	(2.56)	8,342
Streptococcal disease, invasive, group A	2,382	197	(1.00)	1,135	(0.59)	1,050
Streptococcus pneumoniae, drug-resistant, invasive	4,618	152	(0.57)	1,636	(1.00)	2,830
Streptococcal toxic-shock syndrome	61	1	(0.01)	39	(0.02)	21
Syphilis, primary and secondary	6,650	527	(1.68)	5,862	(2.43)	261
Tetanus	40	14	(0.04)	22	(0.01)	4
Toxic-shock syndrome	113	6	(0.02)	59	(0.03)	48
Trichinosis	12	1	(0.00)	10	(0.00)	1
Tuberculosis††	17,531	3,875	(12.37)	13,621	(5.64)	35
Typhoid fever	346	69	(0.22)	130	(0.05)	147
Yellow fever	1	—	(—)	1	(0.00)	—

* No cases of anthrax, paralytic poliomyelitis, or human rabies were reported in 1999.
† Total number of acquired immunodeficiency syndrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), through December 31, 1999.
§ Chlamydia refers to genital infections caused by *C. trachomatis*.
¶ In addition to data collected through the National Electronic Telecommunications System for Surveillance (NETSS), some data concerning ethnicity are collected on aggregate forms different from those used for reported cases. Thus, the total number of cases reported on this table can differ slightly from others. Totals reported to the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
** Totals reported to the National Center for Infectious Diseases as of June 30, 2000.
†† Totals reported to the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000.
Note: Rates <0.01 after rounding are listed as 0.00.

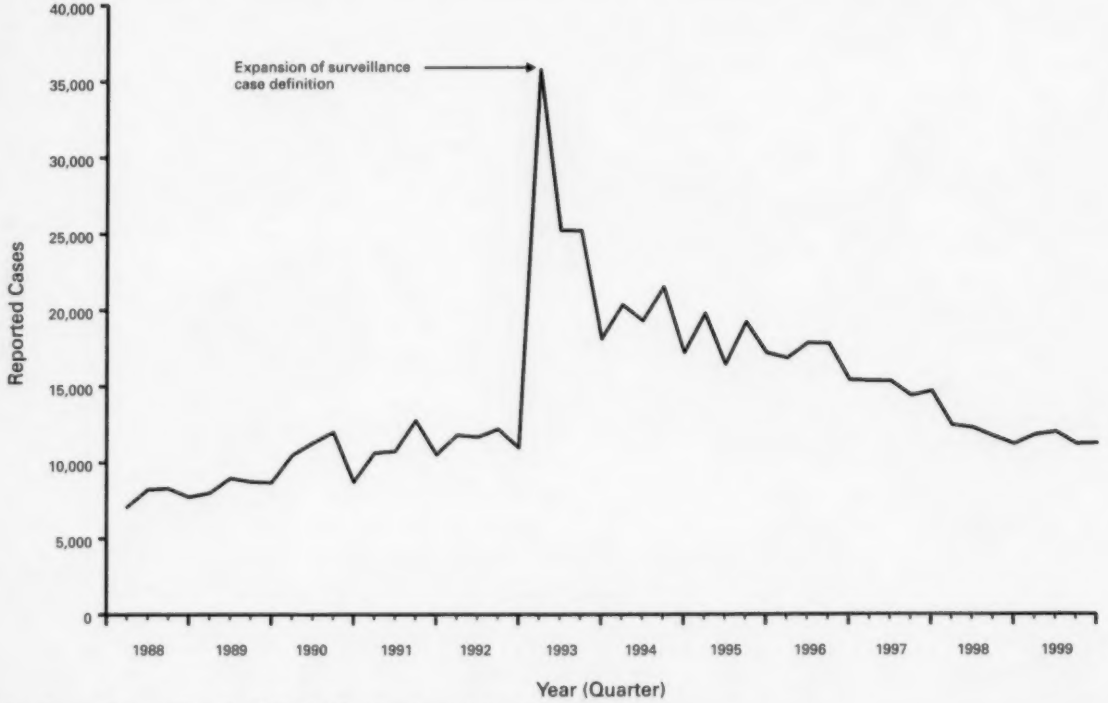
PART 2

Graphs and Maps for Selected Notifiable Diseases in the United States

EXPLANATION OF SYMBOLS USED IN GRAPHS AND MAPS

Data not available	NA
Report of disease is not required in that jurisdiction (not notifiable)	NN
Commonwealth of Northern Mariana Islands	C.N.M.I.
Puerto Rico	P.R.
U.S. Virgin Islands	V.I.

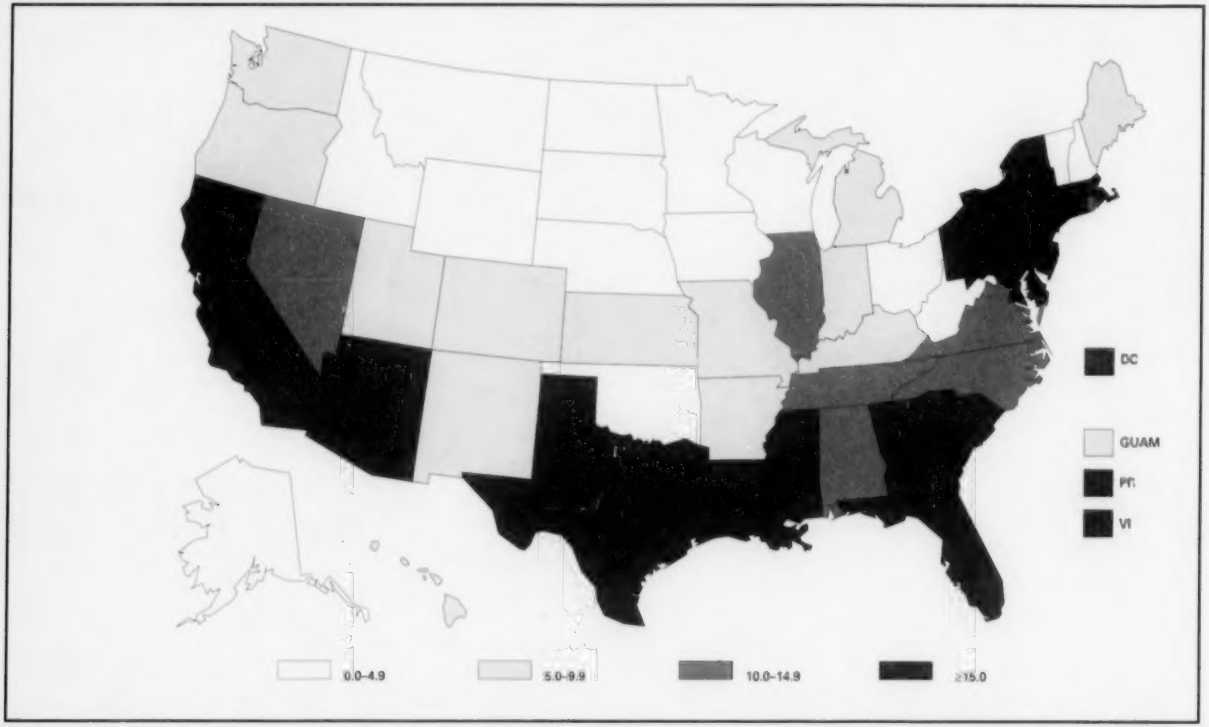
ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) — reported cases by quarter, United States,* 1988–1999



*Includes Guam, Puerto Rico, the U.S. Pacific Islands, and the U.S. Virgin Islands.

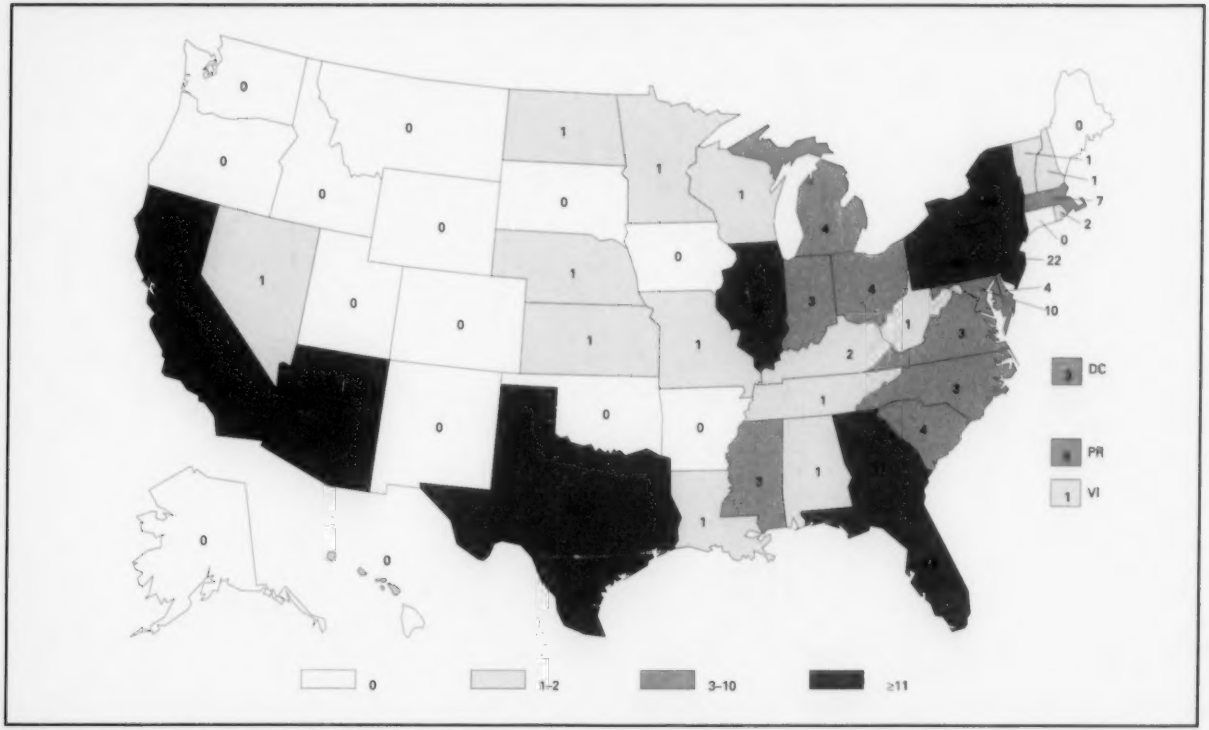
Total number of AIDS cases includes all cases reported to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention, as of December 31, 1999. Total includes cases among residents in U.S. territories and 104 cases among persons with unknown state of residence.

ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) — reported cases per 100,000 population, United States, Guam, Puerto Rico, and U.S. Virgin Islands, 1999



Total number of AIDS cases includes all cases reported to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention, as of December 31, 1999. Total includes cases among residents in U.S. territories and 104 cases among persons with unknown state of residence.

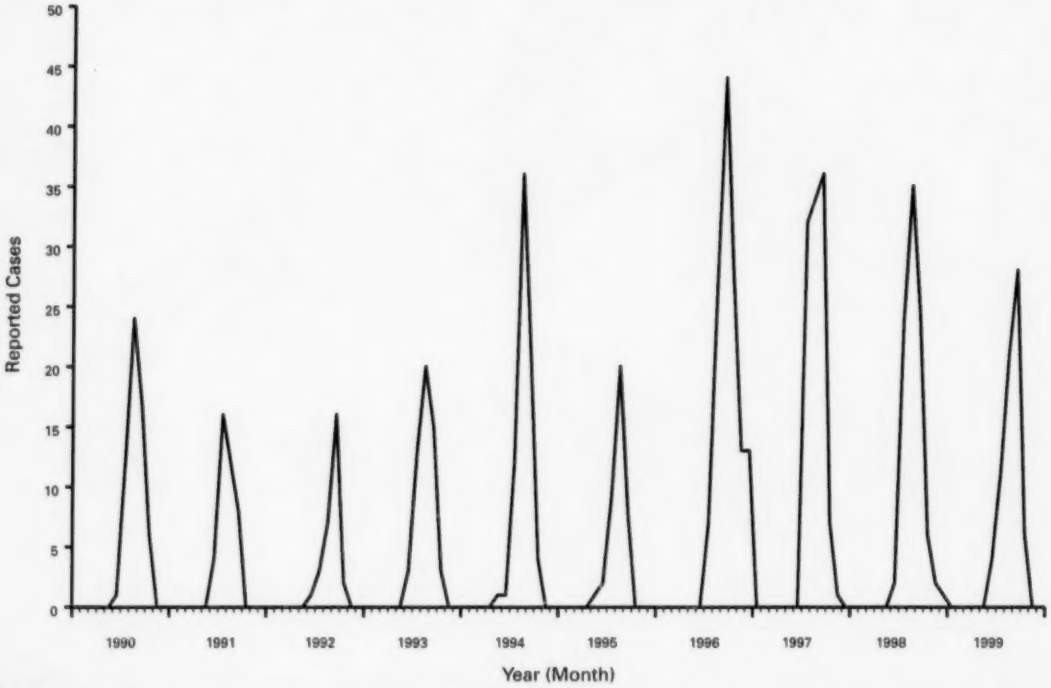
ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) — reported pediatric cases,* United States, Puerto Rico, and U.S. Virgin Islands, 1999



*Children and adolescents aged <13 years.

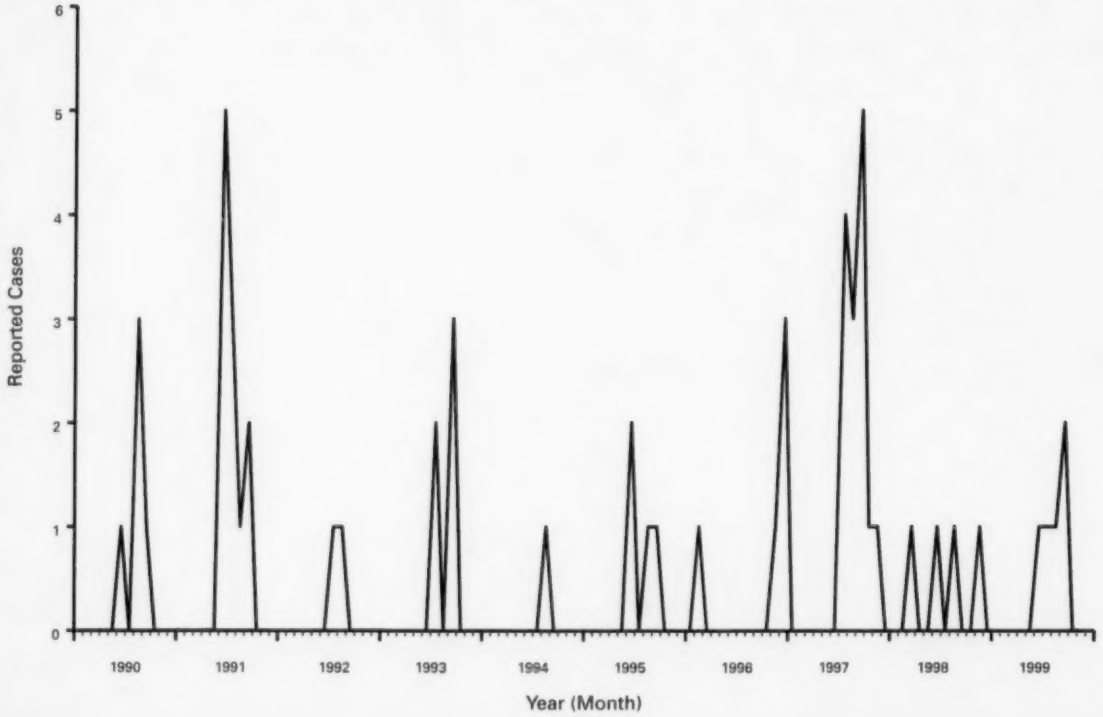
Trends in AIDS incidence among children continued to decrease with the success of efforts to reduce perinatal (i.e., mother-to-child) human immunodeficiency virus (HIV) transmission. Although the number of perinatally acquired AIDS cases declined 43% during 1992–1996, new cases continue to occur disproportionally among young children from racial/ethnic minority populations.

ARBOVIRAL ENCEPHALITIS — reported cases caused by California serogroup viruses by month of onset, United States, 1990–1999



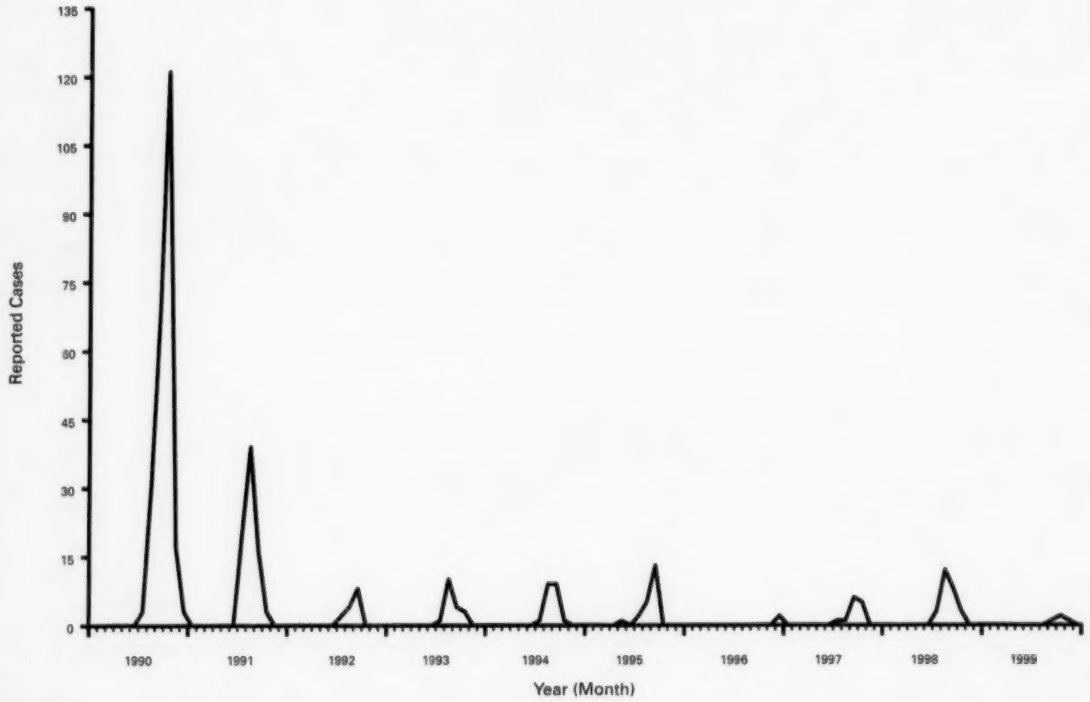
California serogroup viruses (mainly LaCrosse virus in the eastern United States, where the eastern treehole mosquito, *Aedes triseriatus*, is the primary vector) are an endemic cause of encephalitis, especially among children. In 1999, a total of 70 cases was reported from nine states. During 1964–1999, a median of 66 (average: 74) cases was reported each year.

ARBOVIRAL ENCEPHALITIS — reported cases caused by eastern equine encephalitis virus by month of onset, United States, 1990–1999



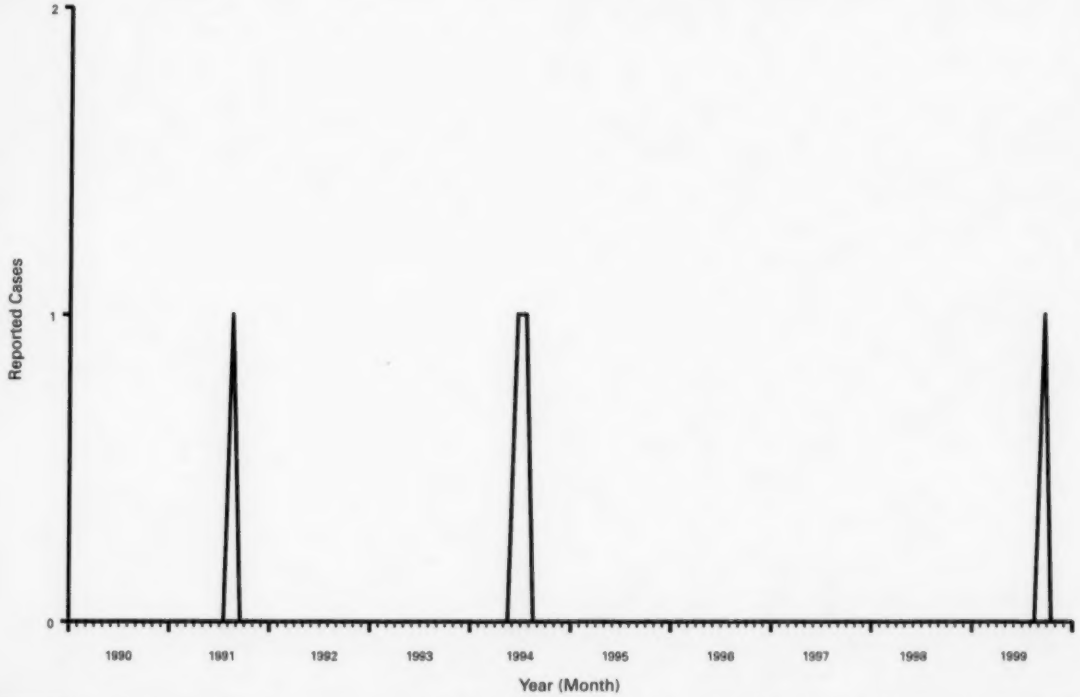
Cases of eastern equine encephalitis among humans, often associated with high mortality rates (i.e., >20%) and severe neurologic sequelae, occur sporadically in the eastern United States. In 1999, five cases were reported from two states. During 1964–1999, a median of four (average: five) cases was reported each year.

ARBOVIRAL ENCEPHALITIS — reported cases caused by St. Louis encephalitis virus by month of onset, United States, 1990–1999



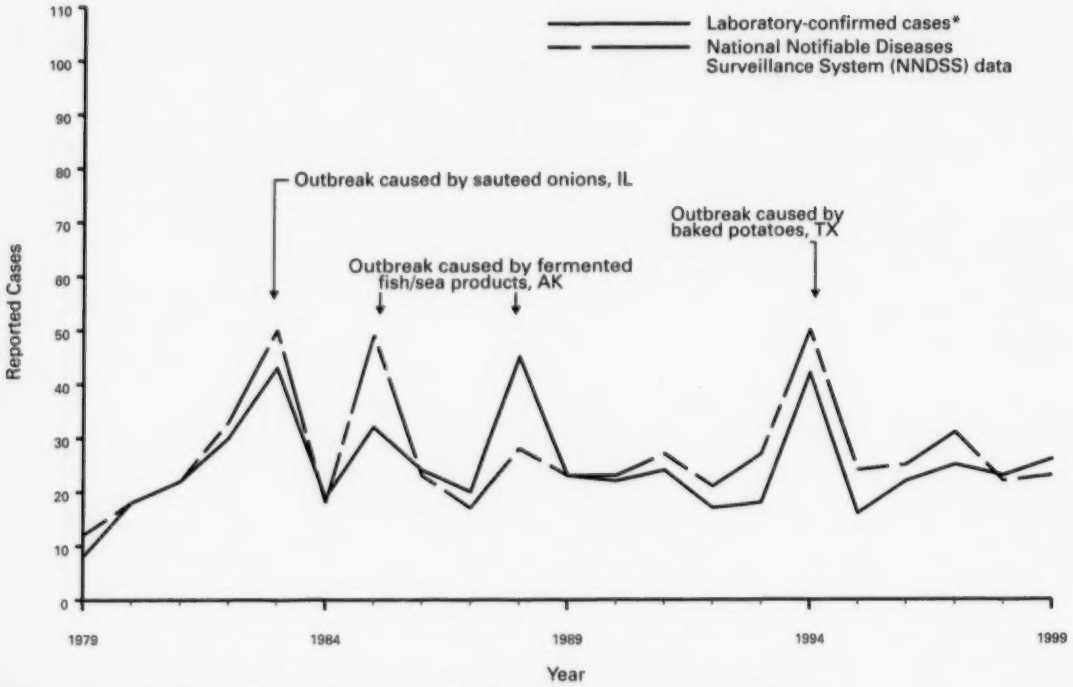
St. Louis encephalitis virus is the main cause of epidemic viral encephalitis in the United States. In 1999, four cases were reported, all from Florida. During 1964–1999, a median of 26 (average: 124) cases was reported each year.

ARBOVIRAL ENCEPHALITIS — reported cases caused by western equine encephalitis virus by month of onset, United States, 1990–1999



The most recent epidemic of western equine encephalitis occurred in Colorado in 1987. Reasons for the recent absence of epidemic transmission are not fully understood. The first nationally reported case since 1994 was reported from Minnesota in 1999. During 1964–1999, a median of three (average: 18) cases was reported each year.

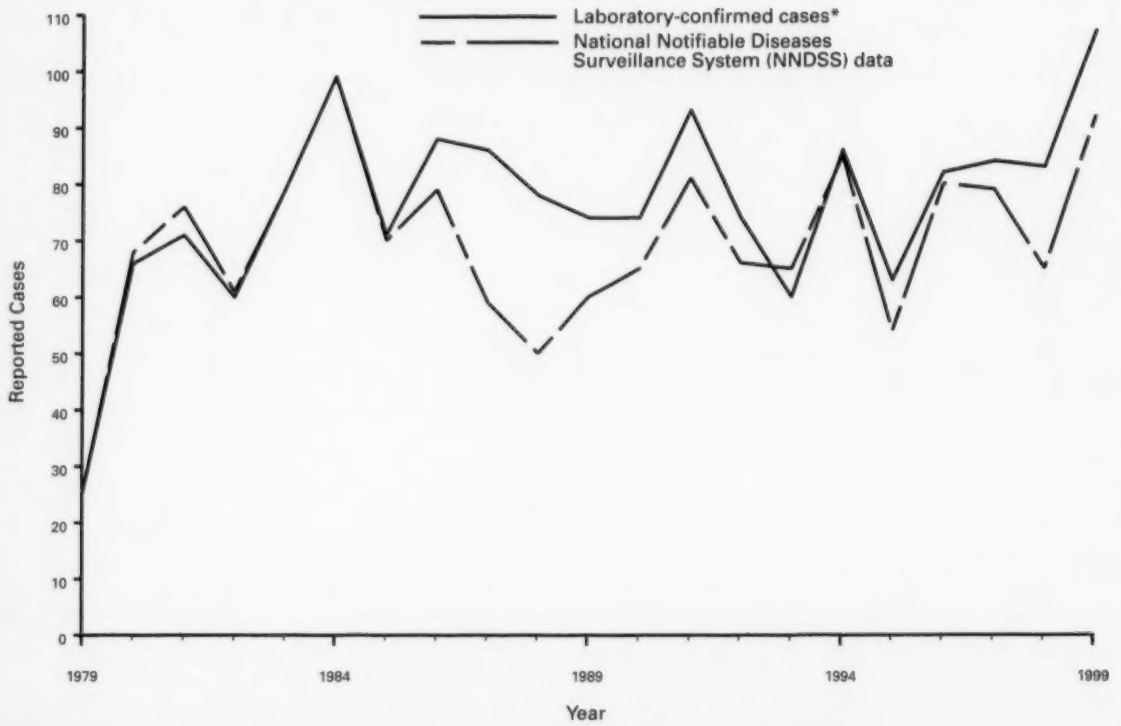
BOTULISM (foodborne) — reported cases by year, United States, 1979–1999



*Data from annual survey of State Epidemiologists and Directors of State Public Health Laboratories.

Foodborne botulism is a rare but potentially fatal disease. Every case of botulism must be treated as a public health emergency, and the contaminated food vehicle and all exposed persons must be identified.

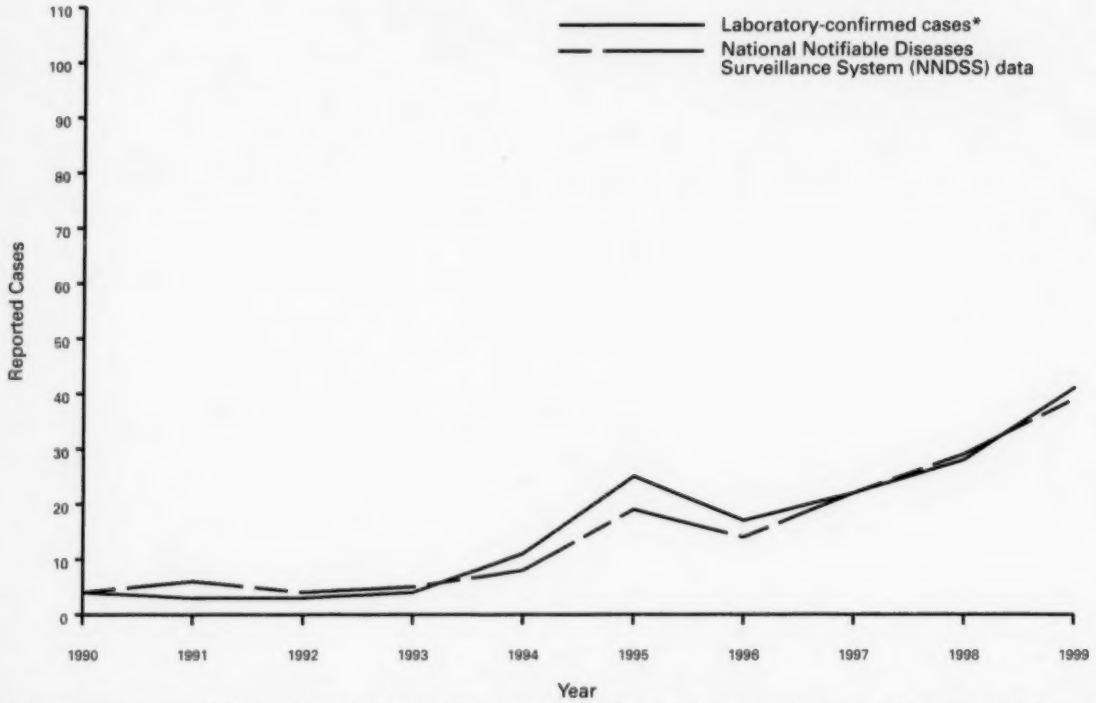
BOTULISM (infant) — reported cases by year, United States, 1979–1999



*Data from annual survey of State Epidemiologists and Directors of State Public Health Laboratories.

Infant botulism is the most common cause of botulism in the United States. Cases are sporadic, and risk factors remain largely unknown.

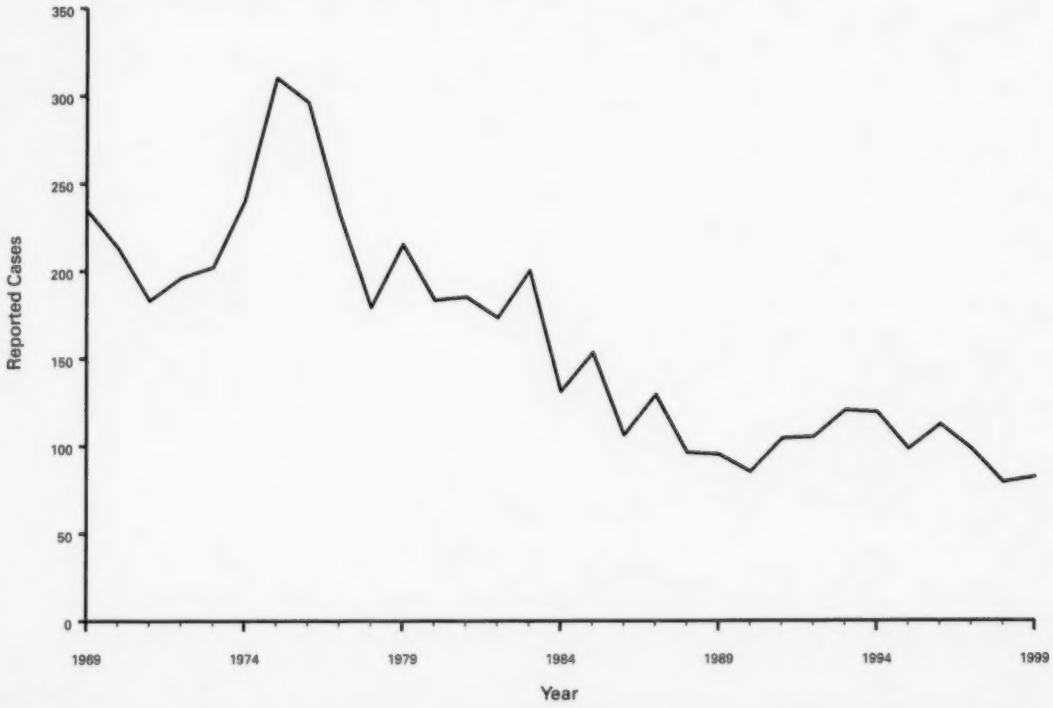
BOTULISM, OTHER (includes wound and unspecified) — reported cases by year, United States, 1990–1999



*Data from annual survey of State Epidemiologists and Directors of State Public Health Laboratories. Data for wound botulism only.

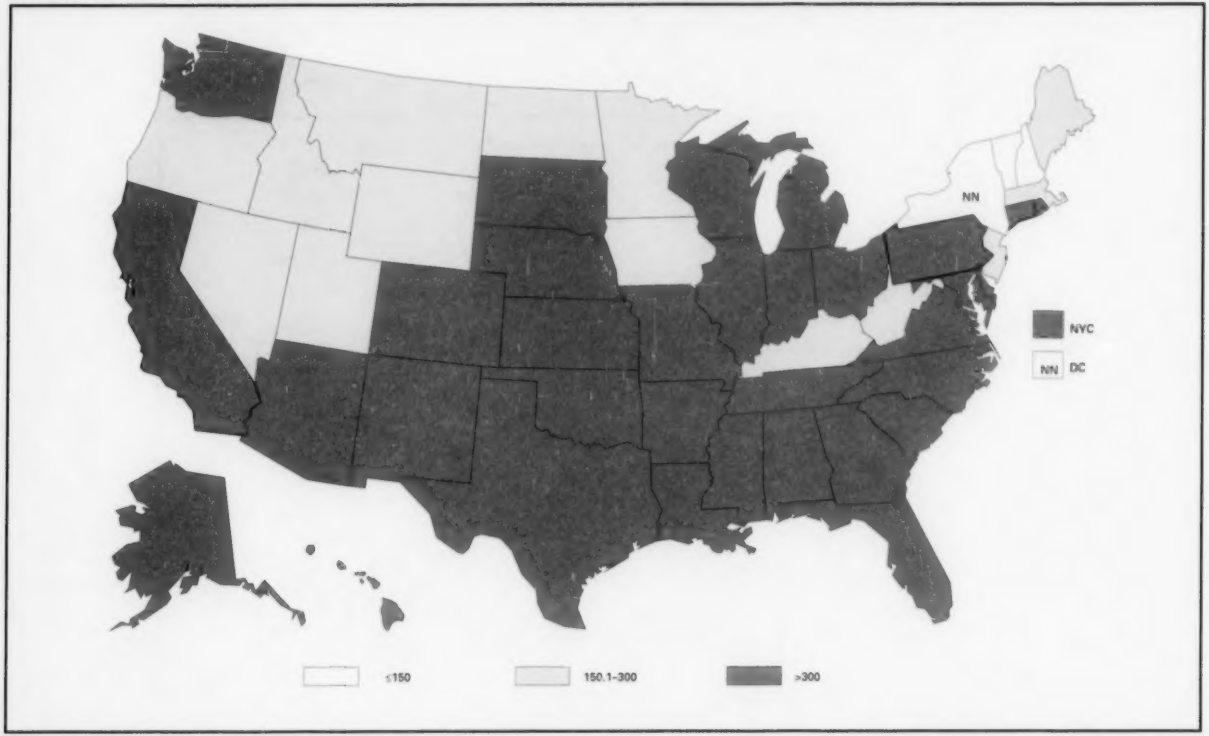
Wound botulism has increased sharply during the past decade and is now the leading cause of adult botulism in the United States.

BRUCELLOSIS — reported cases by year, United States, 1969–1999



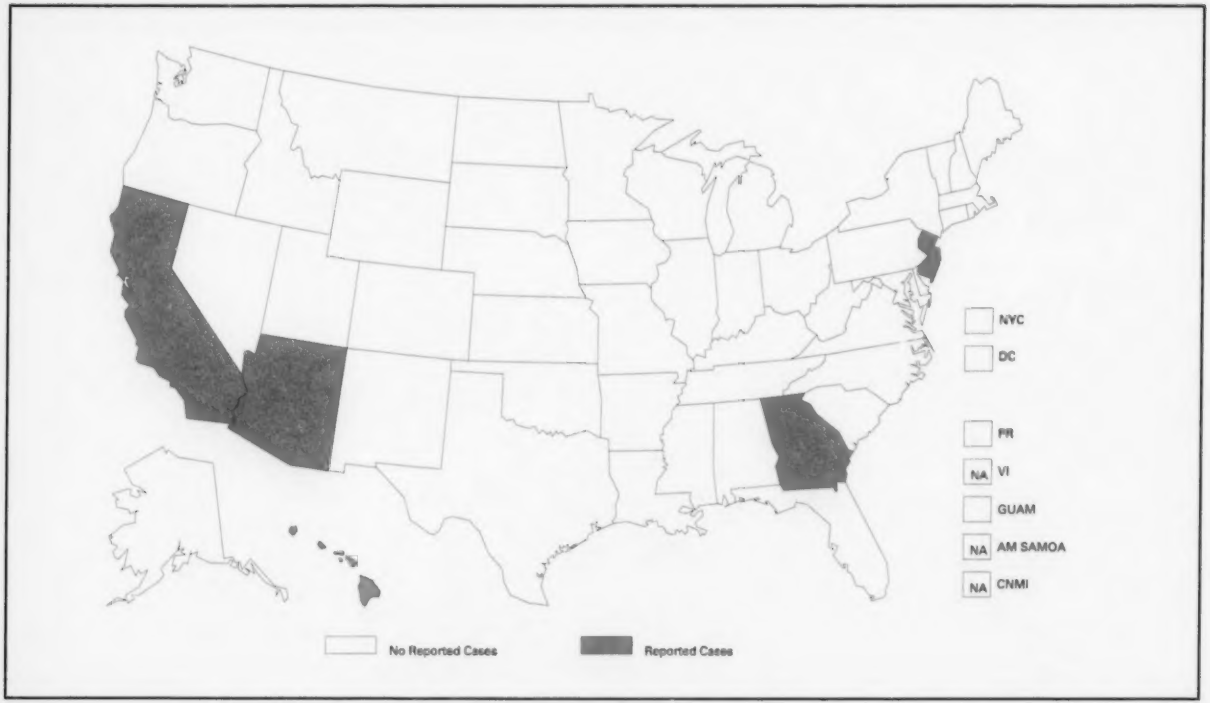
In 1999, *Brucella abortus* was nearly eliminated from U.S. cattle after a brucellosis control program. The control of *B. abortus* among cattle, combined with other public health programs, has nearly eliminated the risk for brucellosis among U.S. residents. However, the disease remains a threat for travelers and foreign nationals who consume unpasteurized milk products and for lab workers exposed to *Brucella* species.

CHLAMYDIA — reported cases among women per 100,000 female population, United States, 1999



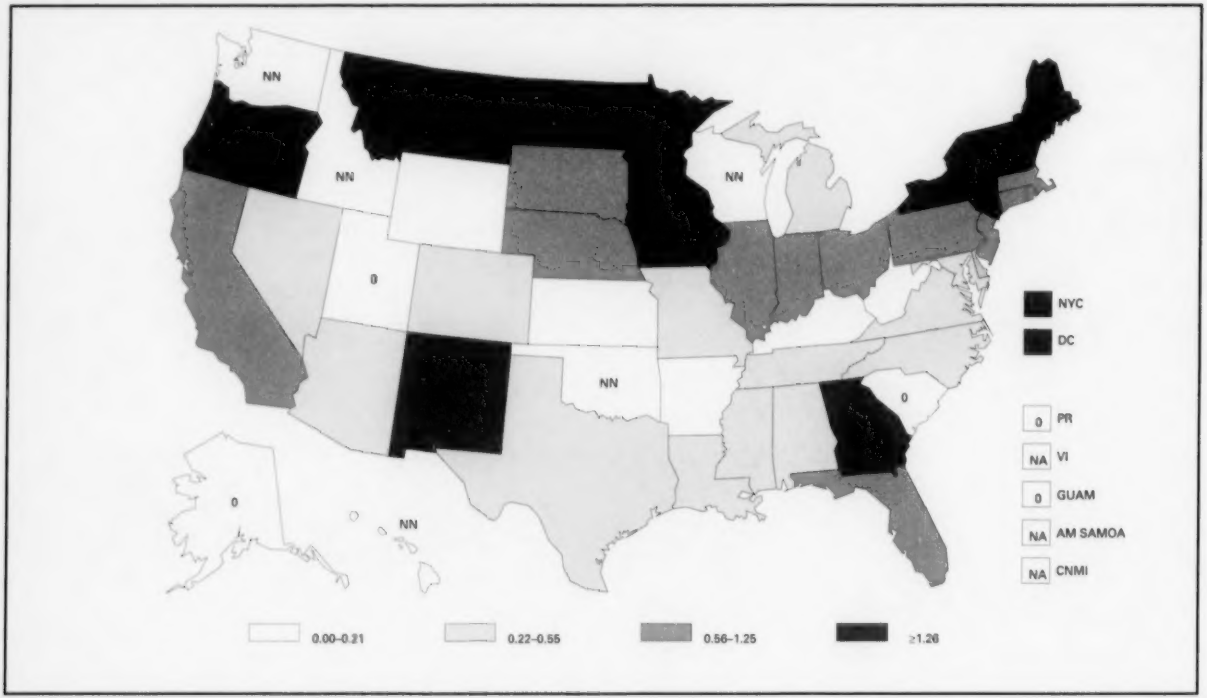
Chlamydia refers to genital infections caused by *Chlamydia trachomatis*. In 1999, the chlamydia rate among women was 400.99 cases/100,000 population. Rates for men are not presented because reporting for men is limited.

CHOLERA — reported cases, United States and territories, 1999



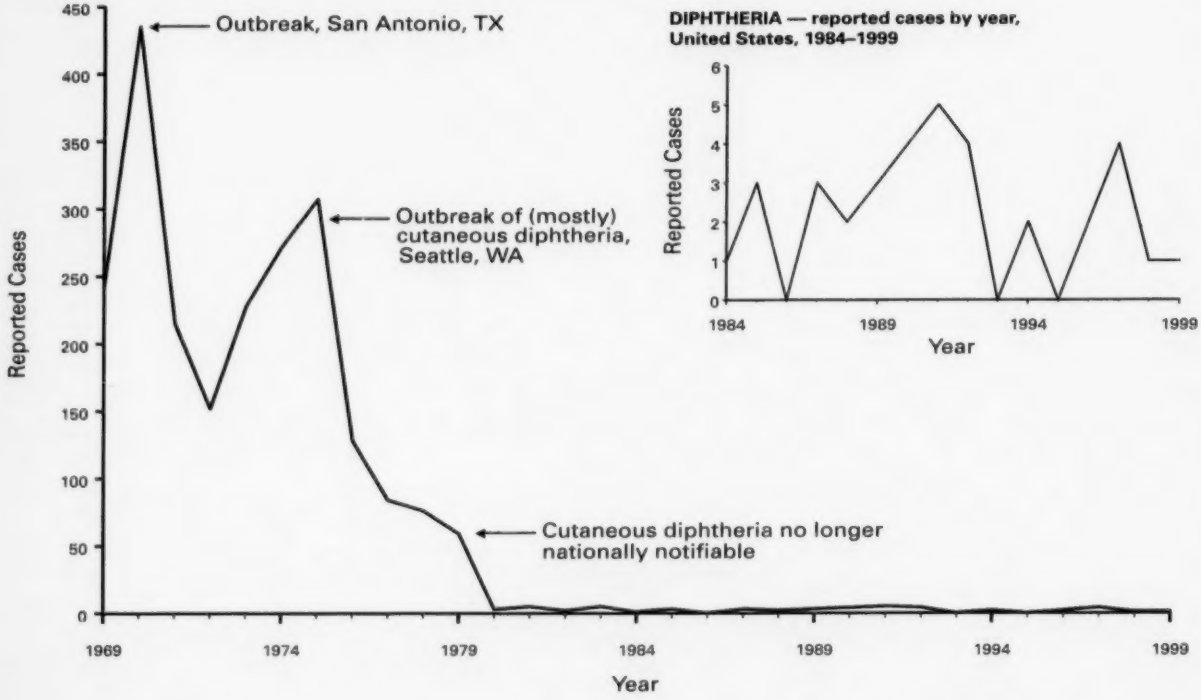
Although cholera has been primarily a disease of travelers to Latin America, Asia, and Africa in recent years, cases are occasionally acquired in the United States from contaminated seafood.

CRYPTOSPORIDIOSIS — reported cases per 100,000 population, United States and territories, 1999



In 1999, *Cryptosporidium* infection was geographically widespread. Waterborne (i.e., from drinking or recreational water) and foodborne outbreaks were reported from Florida, Massachusetts, Minnesota, and Wisconsin. Cases primarily occur in the late summer and early fall and are most prevalent among children aged 1–9 years and adults aged 30–49 years. Case detection and reporting rates can be higher in states that participate in CDC's FoodNet or Emerging Infectious Diseases Program. States participating in 1999 included California, Connecticut, Georgia, Maryland, Minnesota, New York, and Oregon.

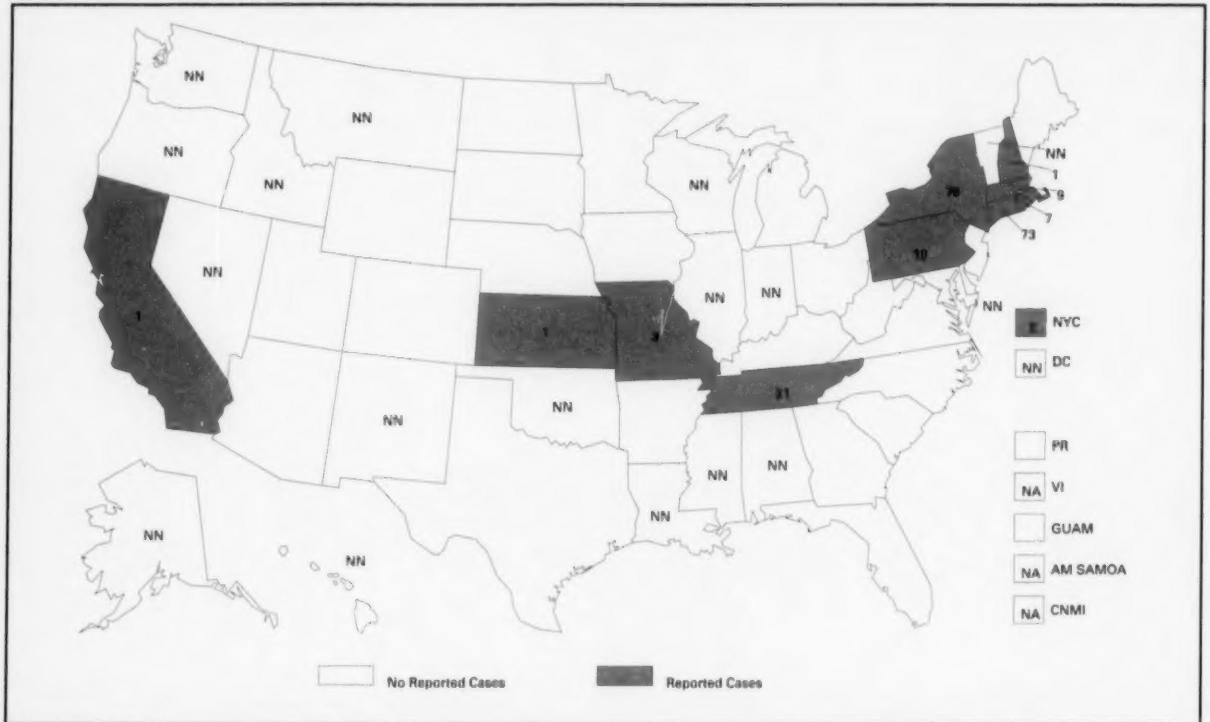
DIPHTHERIA — reported cases by year, United States, 1969–1999



DIPHTHERIA — reported cases by year, United States, 1984–1999

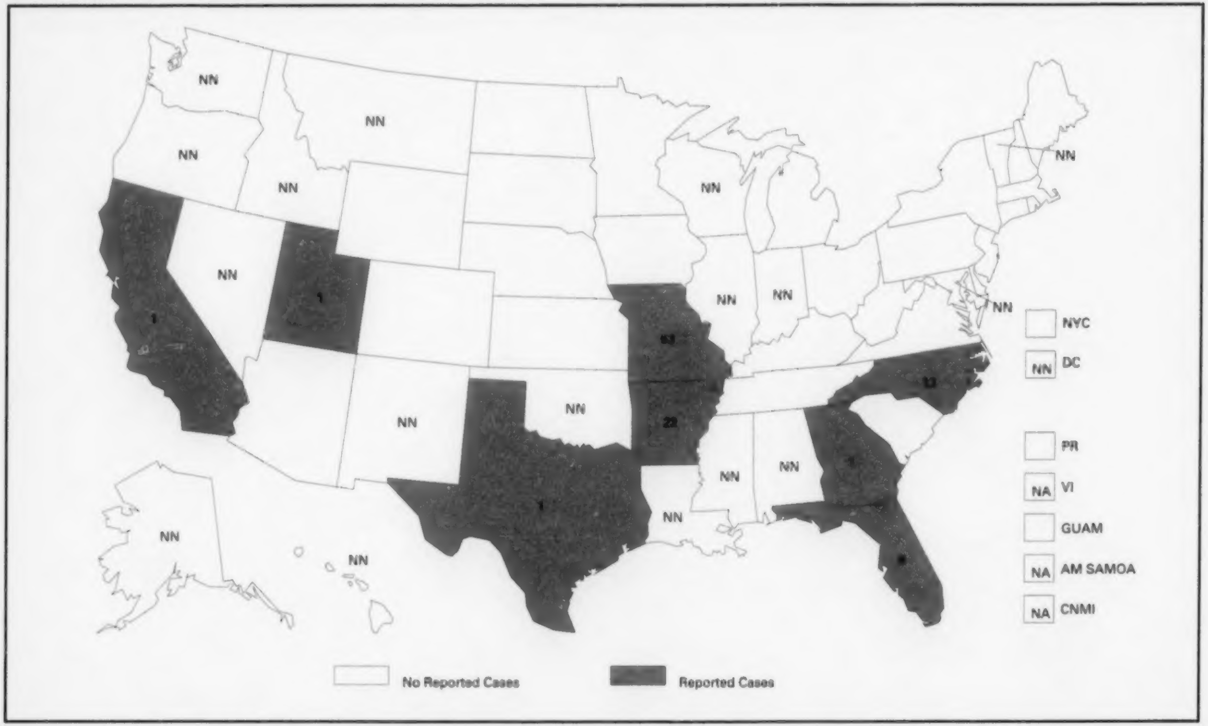
Respiratory diphtheria continues to be rare in the United States. In 1999, only one case of clinical diphtheria associated with a toxigenic strain of *Corynebacterium ulcerans* was reported.

EHRLICHIOSIS, HUMAN GRANULOCYTIC — reported cases, United States and territories, 1999



Human ehrlichiosis is an emerging infectious disease that became nationally notifiable in 1999. Identification and reporting of human ehrlichiosis are incomplete, and the number of cases reported here do not represent the overall distribution or regional prevalence of disease.

EHRLICHIOSIS, HUMAN MONOCYTIC — reported cases, United States and territories, 1999



Human ehrlichiosis is an emerging infectious disease that became nationally notifiable in 1999. Identification and reporting of human ehrlichiosis is incomplete, and the number of cases reported here do not represent the overall distribution or regional prevalence of disease.

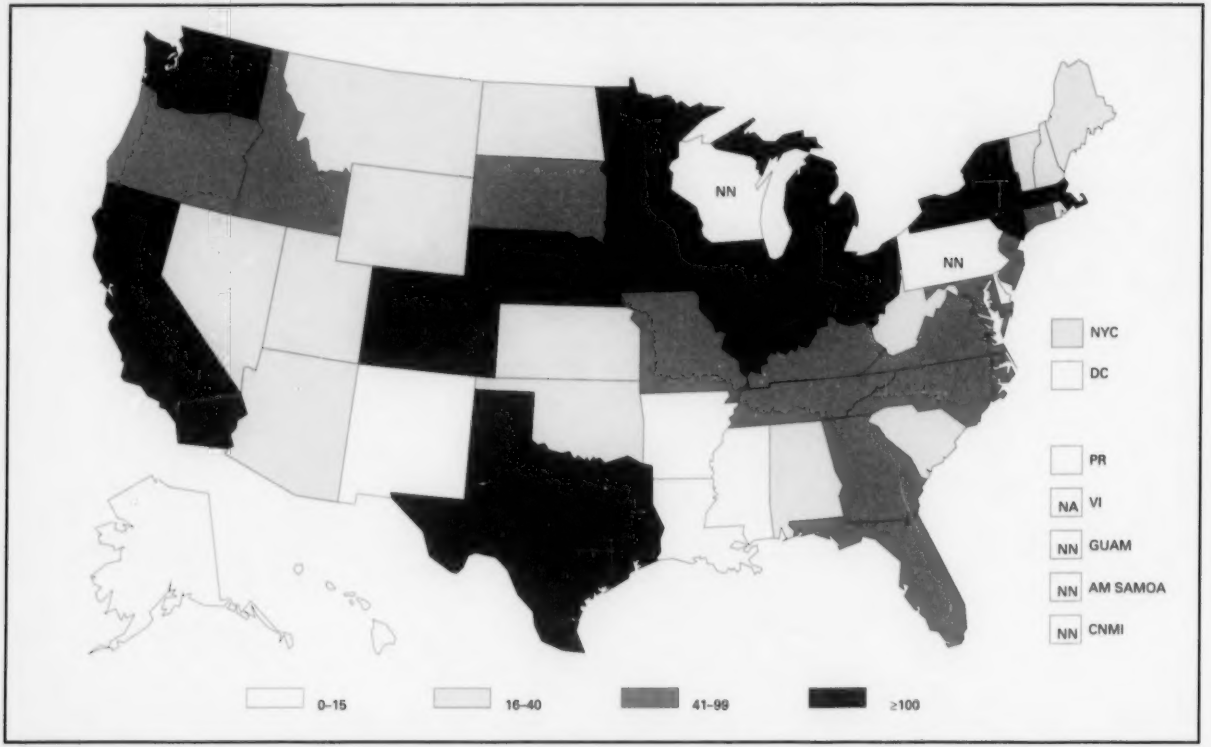
EHRLICHIOSIS, HUMAN GRANULOCYTIC — reported cases, United States and territories, 1999

Human ehrlichiosis is an emerging infectious disease that became nationally notifiable in 1999. Identification and reporting of human ehrlichiosis are incomplete, and the number of cases reported here do not represent the overall distribution or regional prevalence of disease.

EHRLICHIOSIS, HUMAN MONOCYTIC — reported cases, United States and territories, 1999

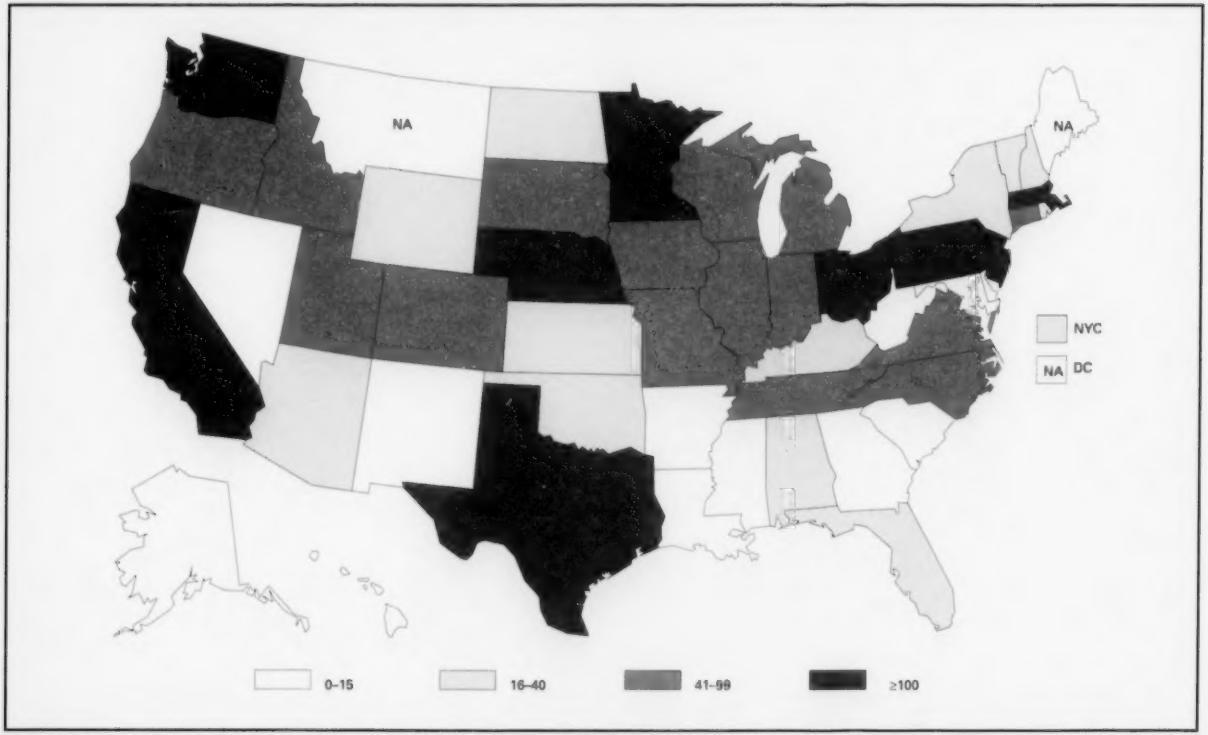
Human ehrlichiosis is an emerging infectious disease that became nationally notifiable in 1999. Identification and reporting of human ehrlichiosis is incomplete, and the number of cases reported here do not represent the overall distribution or regional prevalence of disease.

***ESCHERICHIA COLI* O157:H7 — reported cases, United States and territories, 1999**



The number of states in which *Escherichia coli* O157:H7 infection is a notifiable disease increased to 48 in 1999. However, because <60% of clinical laboratories routinely test all stool specimens — or even all bloody stool specimens — for *E. coli* O157:H7, many infections are not recognized or reported.

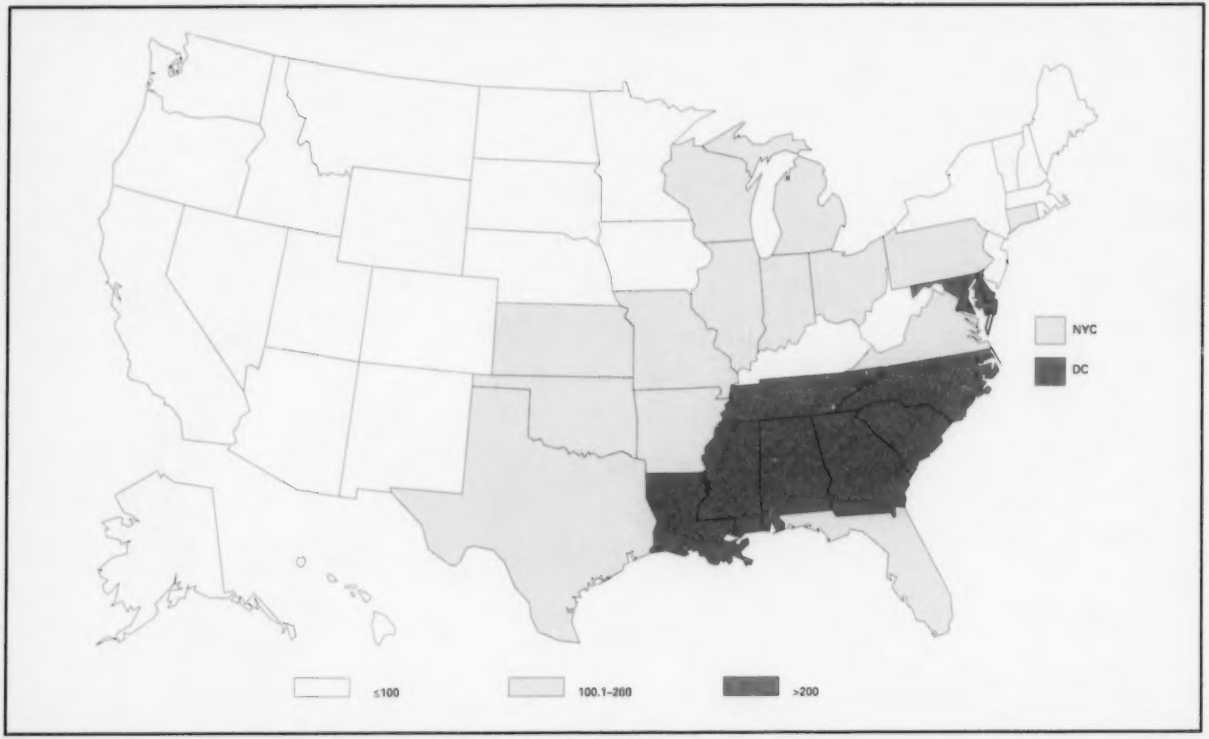
ESCHERICHIA COLI O157:H7 — reported isolates,* United States, 1999



*Data from the Public Health Laboratory Information System (PHLIS).

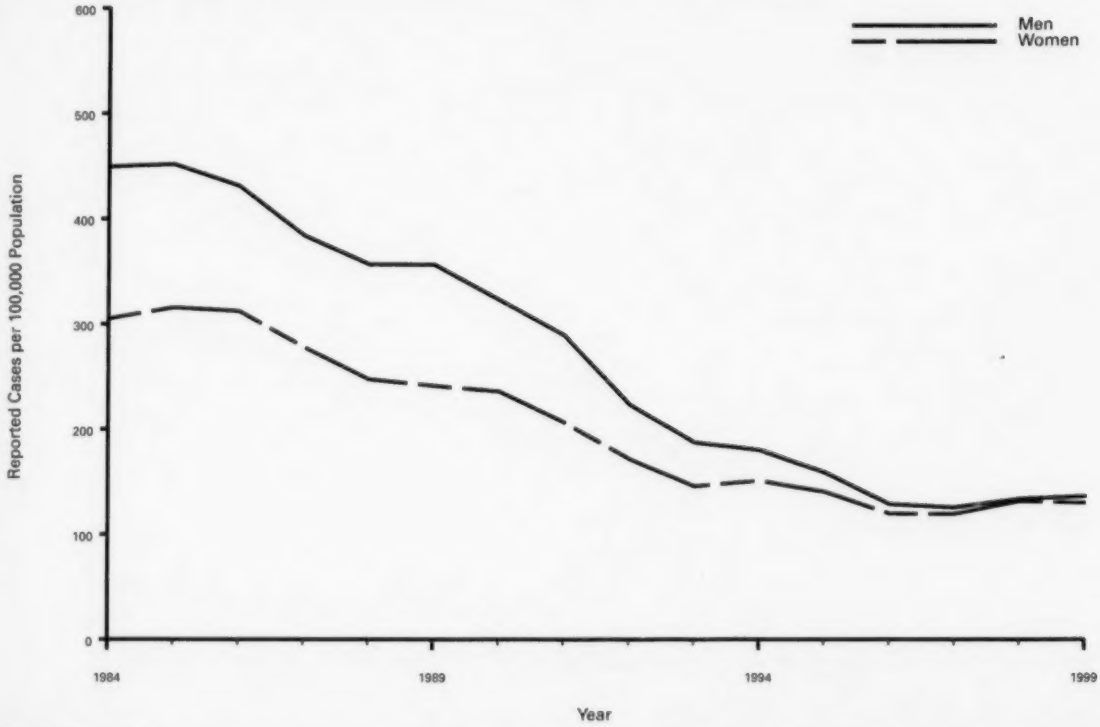
Only *Escherichia coli* O157:H7 isolates confirmed by a state public health laboratory are reported to the Public Health Laboratory Information System (PHLIS). Many public health laboratories can subtype isolates using pulsed-field gel electrophoresis and compare their findings electronically with other states through PulseNet, a national network of public health laboratories.

GONORRHEA — reported cases per 100,000 population, United States, 1999



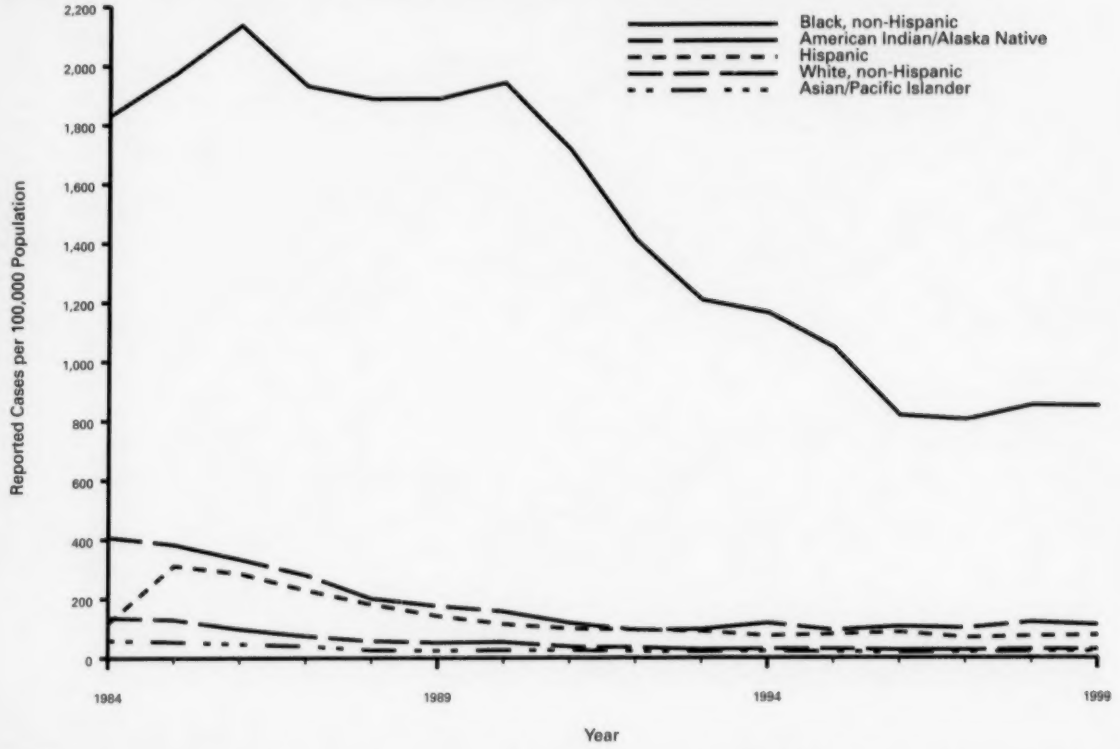
In 1999, the overall U.S. rate of gonorrhea was 133.2 cases/100,000 population. Twenty-six states reported gonorrhea rates below the revised *Healthy People 2000* national objective of ≤100 cases/100,000 population.

GONORRHEA — reported cases per 100,000 population by sex, United States, 1984–1999



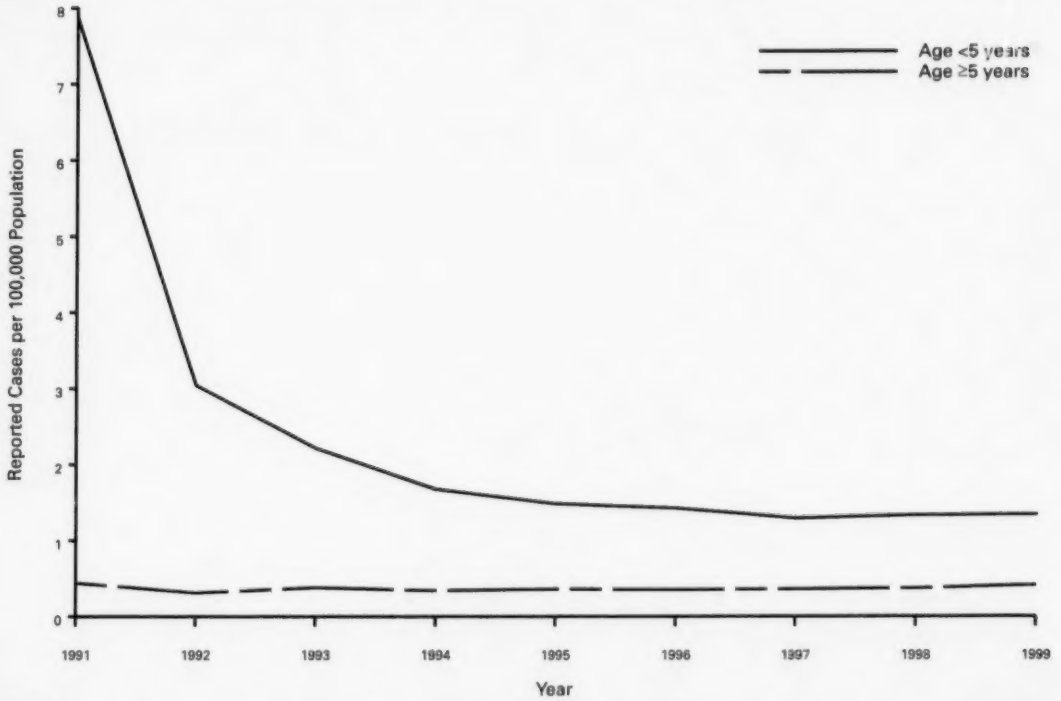
In 1999, the overall U.S. rate of gonorrhea was 133.2 cases/100,000 population, a 1.2% increase from 1998 (131.6). Among men, the rate increased from 132.7 in 1998 to 136.0 in 1999. Among women, the rate decreased only slightly from 130.0 in 1998 to 129.9 in 1999 (Division of Sexually Transmitted Diseases Prevention, National Center for HIV, STD, and TB Prevention).

GONORRHEA — reported cases per 100,000 population by race and ethnicity, United States, 1984–1999



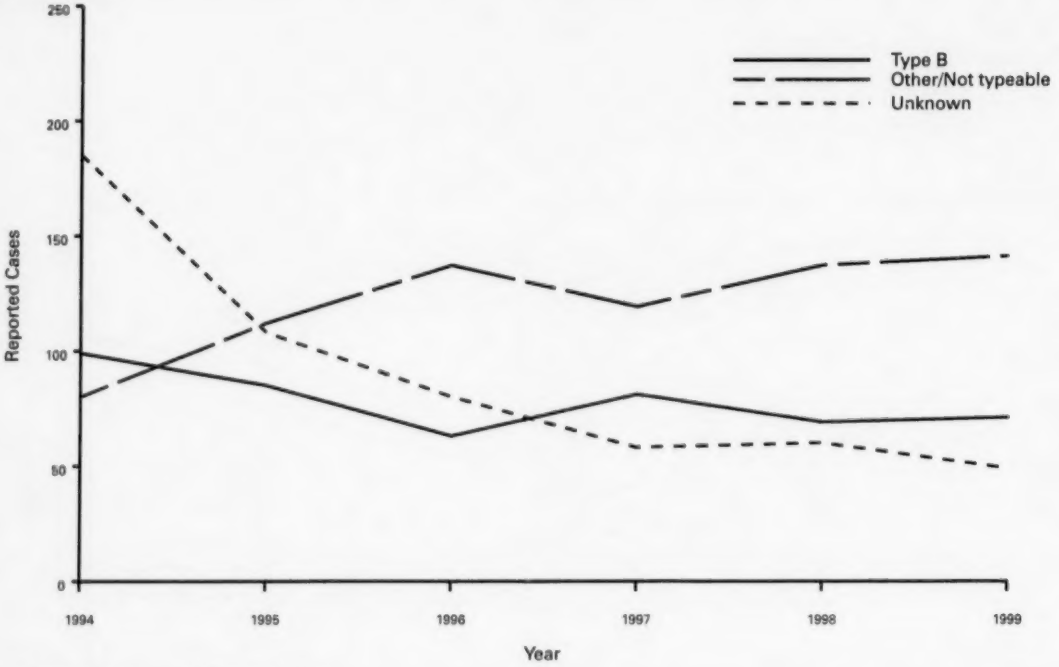
In 1999, gonorrhea rates decreased among non-Hispanic whites, non-Hispanic blacks, and American Indian/Alaska Natives, but increased among Hispanics and Asian/Pacific Islanders.

HAEMOPHILUS INFLUENZAE, INVASIVE DISEASE — reported cases per 100,000 population by age group, United States, 1991–1999



Before the introduction of a *Haemophilus influenzae* type b (Hib) vaccine in December 1987, the incidence of Hib invasive disease among children aged <5 years was approximately 100 cases/100,000 population. In 1999, a total of 266 cases of all serotypes of *H. influenzae* invasive disease among children aged <5 years was reported (incidence: 1.2/100,000 children), with 72 (27%) cases caused by Hib (National Immunization Program).

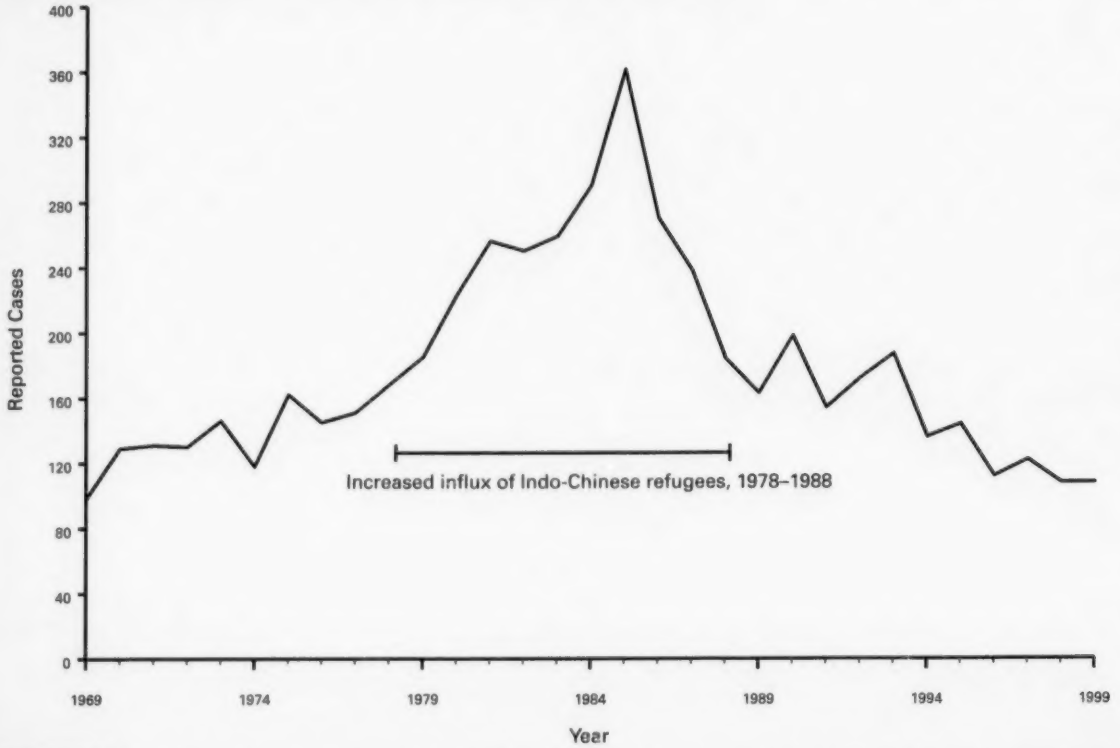
***HAEMOPHILUS INFLUENZAE*, INVASIVE DISEASE — reported cases by year and serotype among children <5 years,* United States, 1994–1999**



*Data from National Immunization Program.

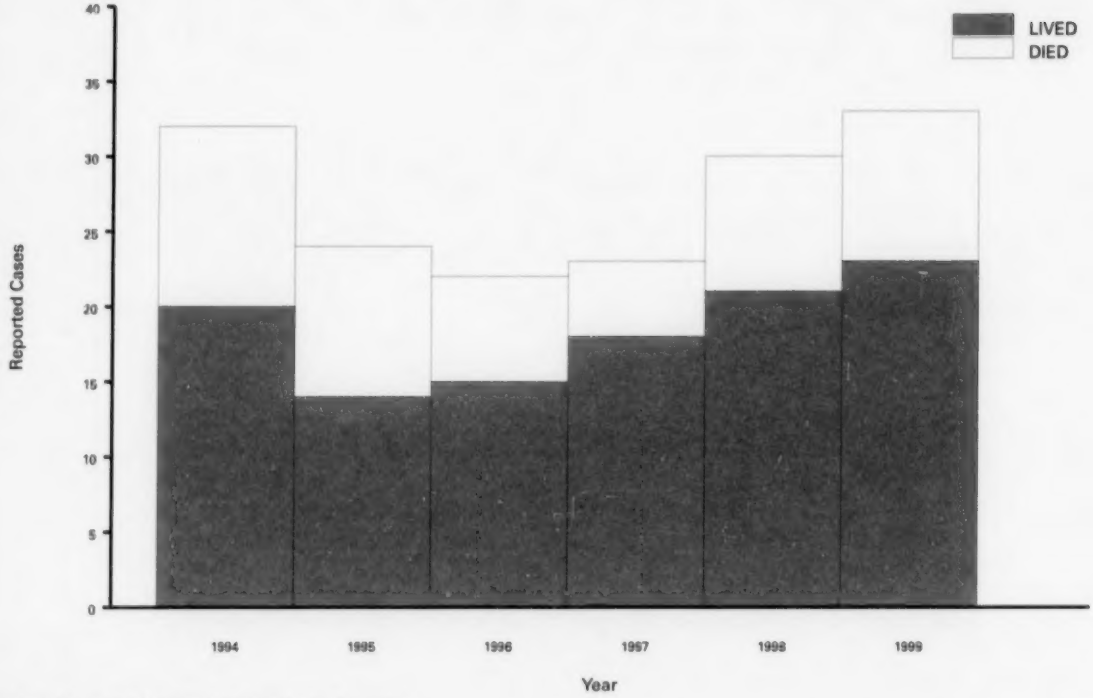
In 1999, serotype information was reported for 81% of 266 *Haemophilus influenzae* (Hi) invasive disease cases among children aged <5 years, compared with 41% of 340 cases reported in 1994 (National Immunization Program). Serotype information is needed to monitor progress toward *H. influenzae* type b (Hib) elimination. Because slide agglutination serotyping results can be misinterpreted (e.g., non-typeable Hi isolates reported as Hib), CDC is evaluating the use of both slide agglutination and polymerase chain reaction testing to better assess Hib cases.

HANSEN DISEASE (leprosy) — reported cases by year, United States, 1969–1999



In 1999, a total of 108 cases of Hansen disease was reported in the United States. The number of cases peaked at 361 in 1985, and since 1988, has remained relatively stable.

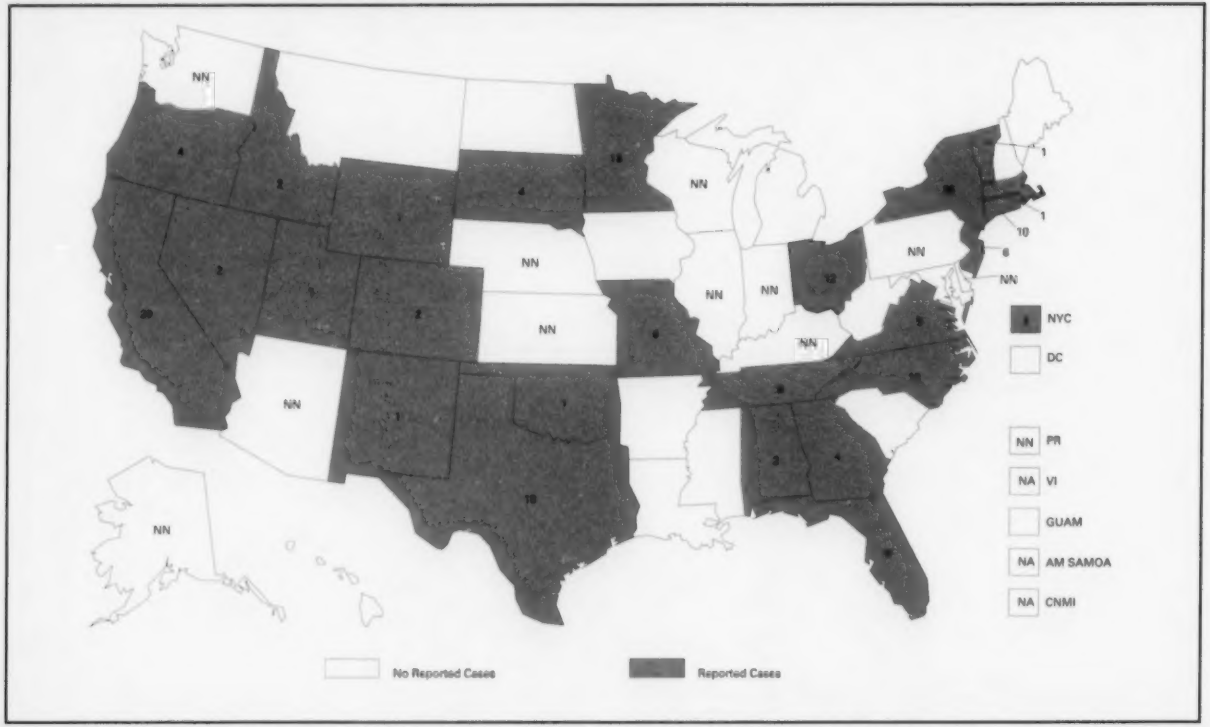
HANTAVIRUS PULMONARY SYNDROME — reported cases by survival status,* by year, United States, 1994–1999



*Data from National Center for Infectious Diseases.

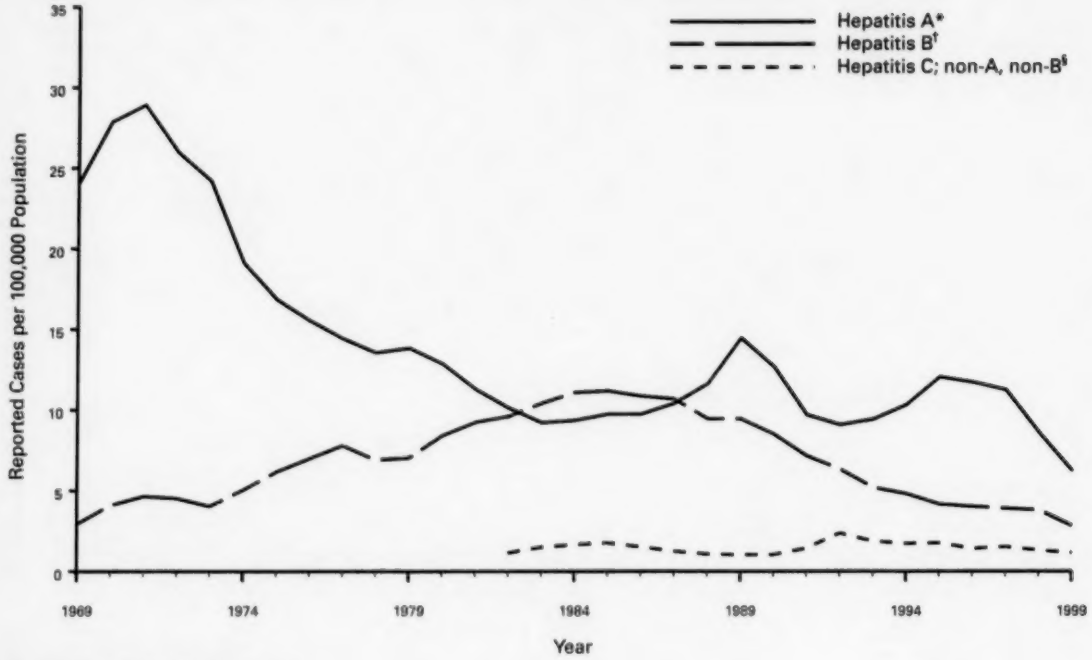
In 1999, hantavirus pulmonary syndrome cases were reported from 14 states. Most cases occur in the western United States, but Indiana and Pennsylvania also reported cases in 1999. California, Pennsylvania, and Washington reported substantial increases in cases since 1998.

HEMOLYTIC UREMIC SYNDROME, POSTDIARRHEAL — reported cases, United States and territories, 1999



In the United States, most cases of postdiarrheal hemolytic uremic syndrome are caused by infection with *Escherichia coli* O157:H7 or other *E. coli* bacteria that produce Shiga toxin.

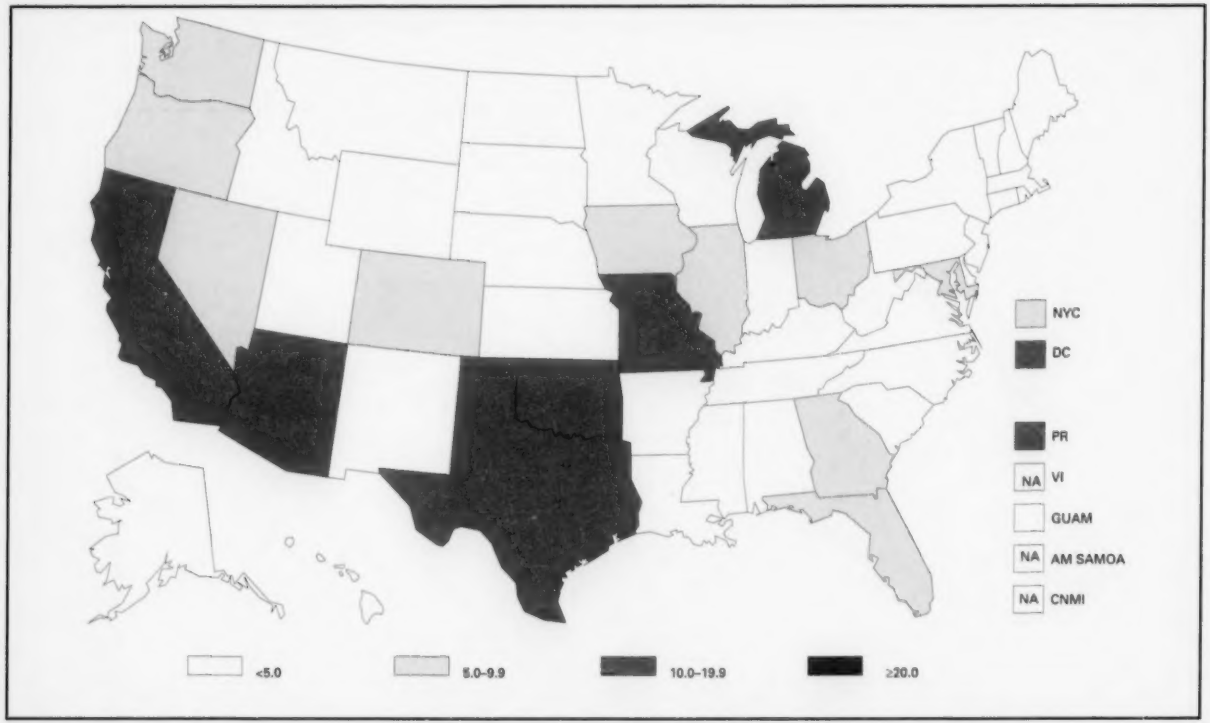
HEPATITIS — reported cases per 100,000 population by year, United States, 1969–1999



*Hepatitis A vaccine was first licensed in 1995.
† Hepatitis B vaccine was first licensed in 1982.
§ An anti-HCV (hepatitis C virus) antibody test first became available in 1990.

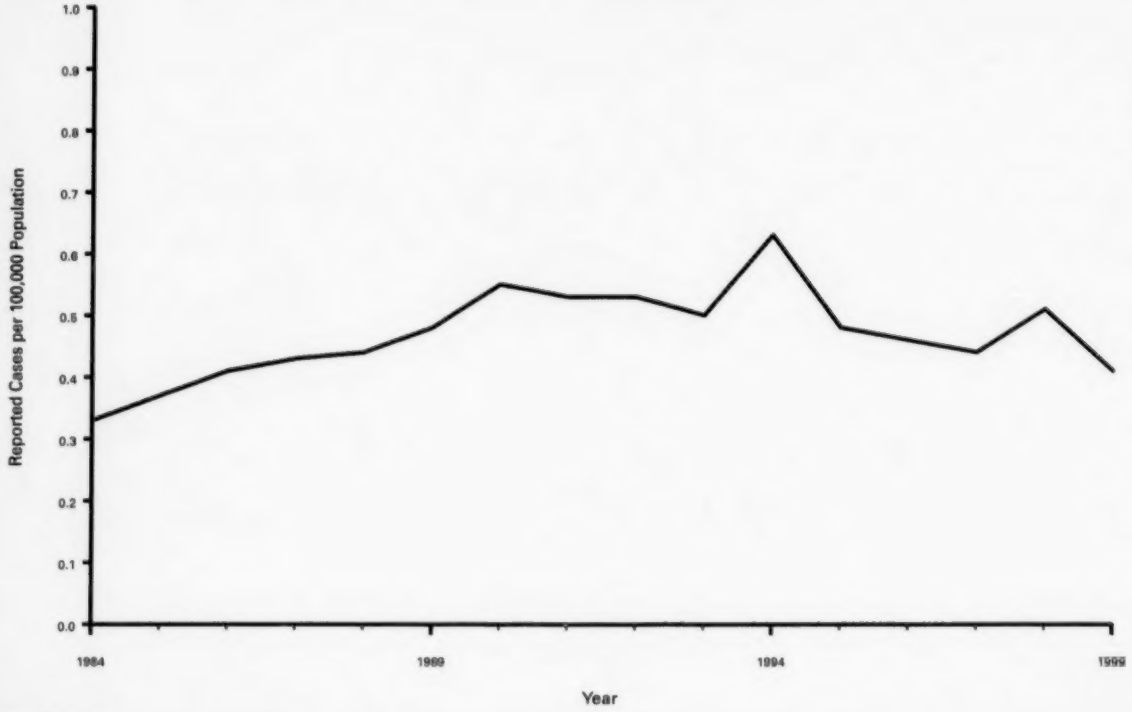
In 1999, the hepatitis A rate was the lowest ever recorded, but cyclic increases are observed approximately every 10 years. Hepatitis B incidence continues to decline, but asymptomatic infections and underreporting mean that reported cases represent only a fraction of actual infections (i.e., approximately 185,000 new infections annually during 1995–1998). The trend in reported hepatitis C (non-A, non-B) cases after 1990 is misleading because reported cases included those based only on a positive lab test for anti-HCV, most of which represent chronic HCV infection.

HEPATITIS A — reported cases per 100,000 population, United States and territories, 1999



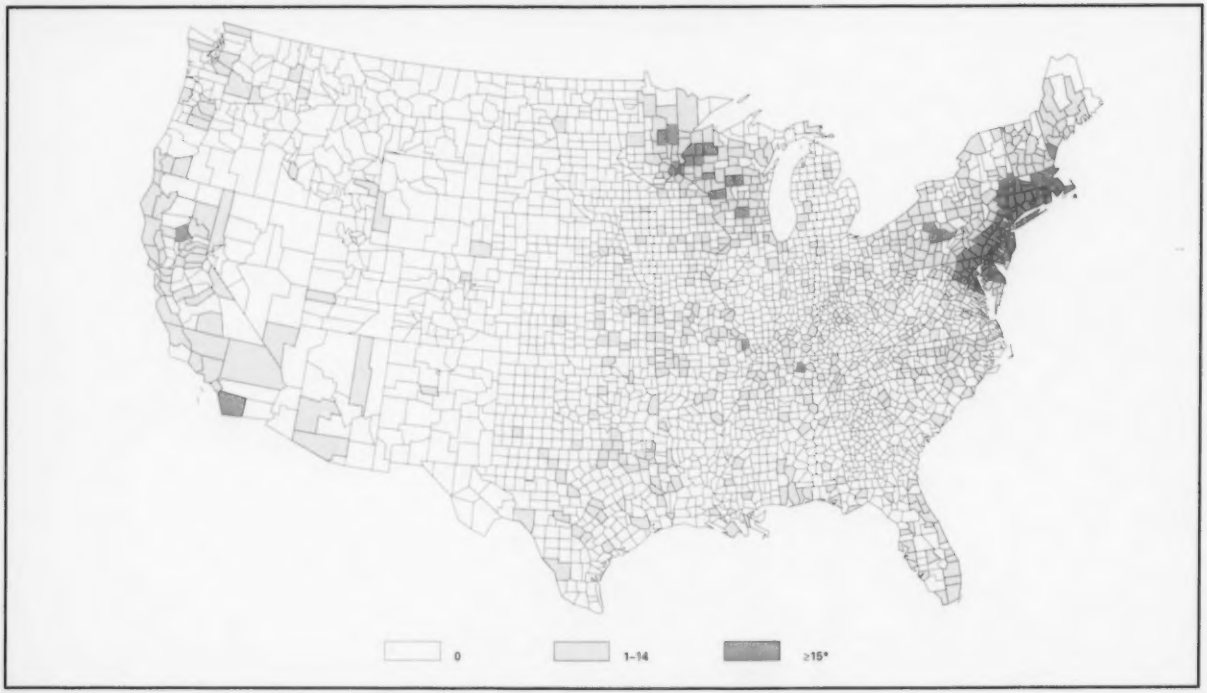
As in previous years, the hepatitis A rate was higher in the western United States than other regions. In states with consistently elevated hepatitis A virus (HAV) infection rates, widespread routine vaccination of children is needed to prevent and control HAV transmission.

LEGIONELLOSIS — reported cases per 100,000 population by year, United States, 1984–1999



In 1999, the overall reported rate of legionellosis, also called Legionnaires' disease, was 0.41 cases/100,000 population. However, data from population-based studies indicate that the actual rate is approximately 10 times higher.

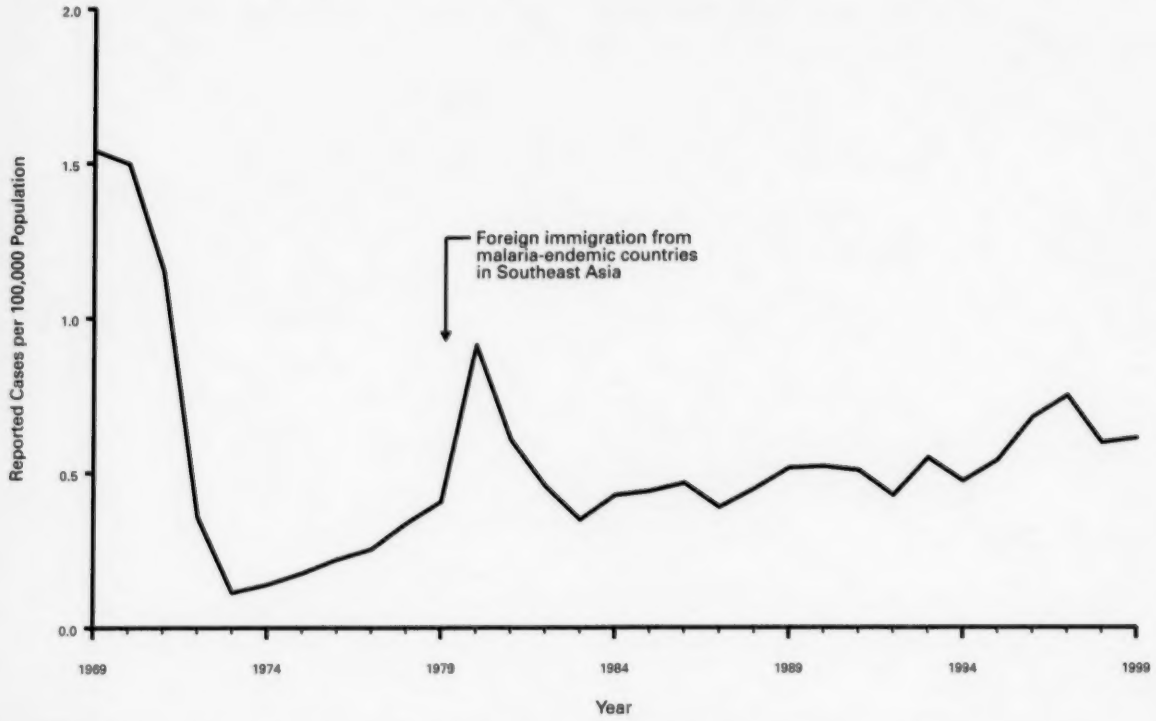
LYME DISEASE — reported cases by county, United States and territories, 1999



*The total number of cases from these counties represented 90% of all cases reported in 1999.

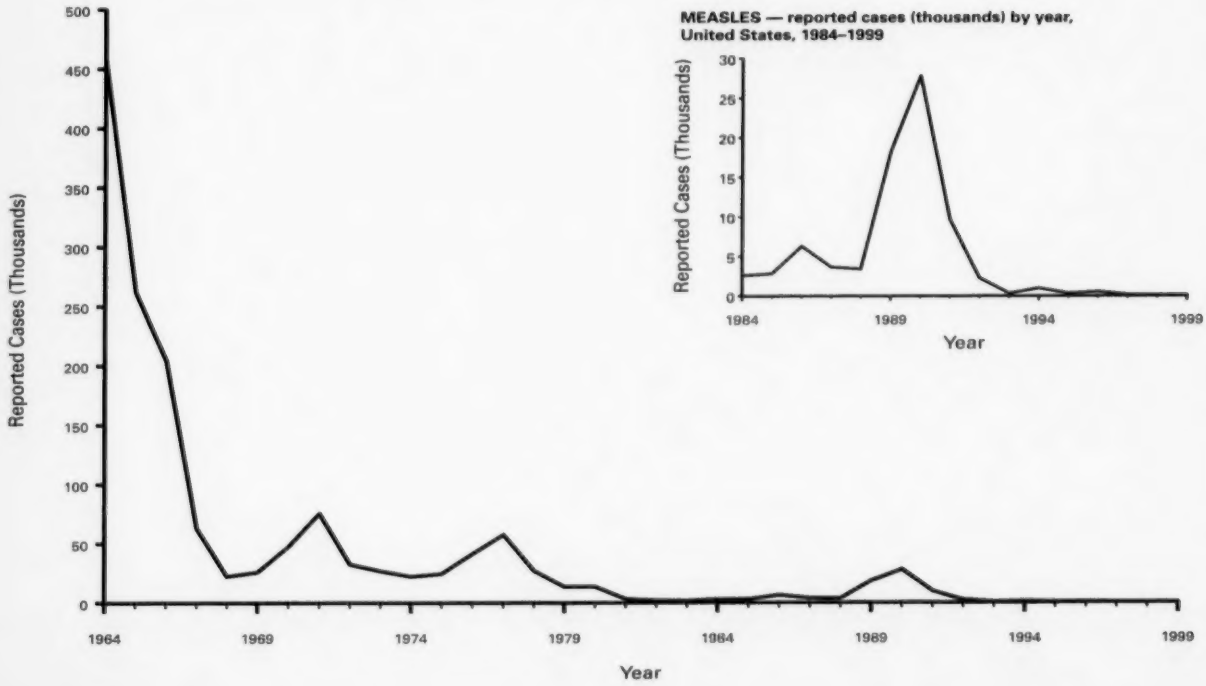
By integrating prevention strategies into community-based programs, CDC and state health departments hope to achieve the *Healthy People 2010* goal of reducing the incidence of Lyme disease to 9.7 cases/100,000 population in endemic states.

MALARIA — reported cases per 100,000 population by year, United States, 1969–1999



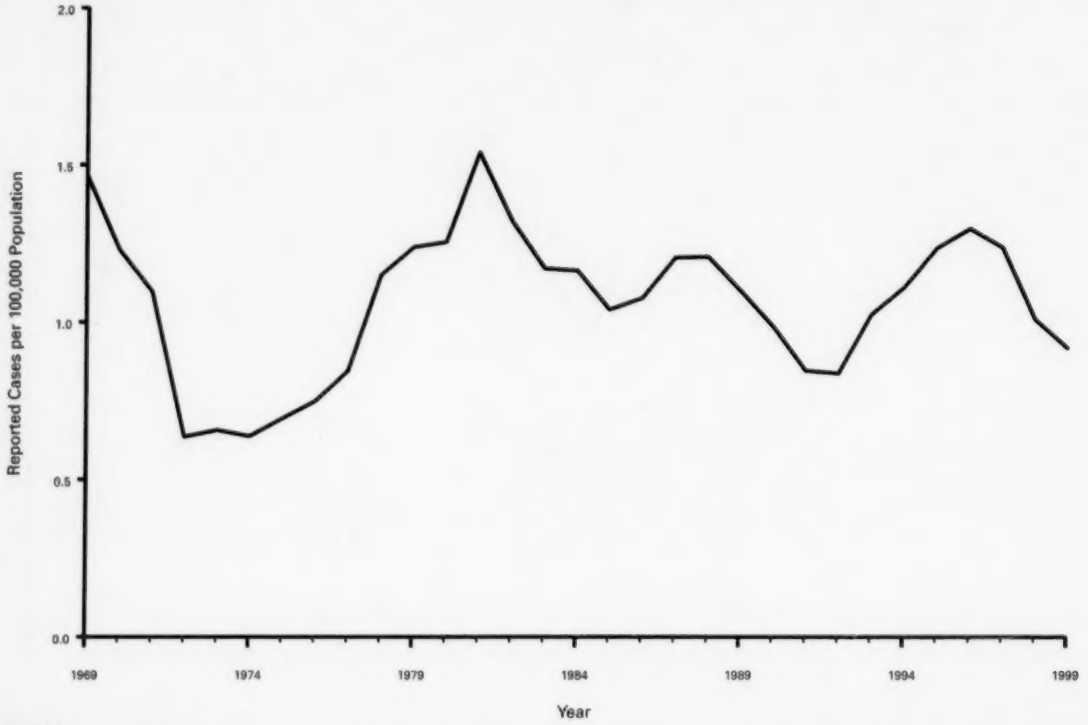
Imported malaria cases have increased during the past 15 years, likely because of increased international travel and immigration.

MEASLES — reported cases (thousands) by year, United States, 1964–1999



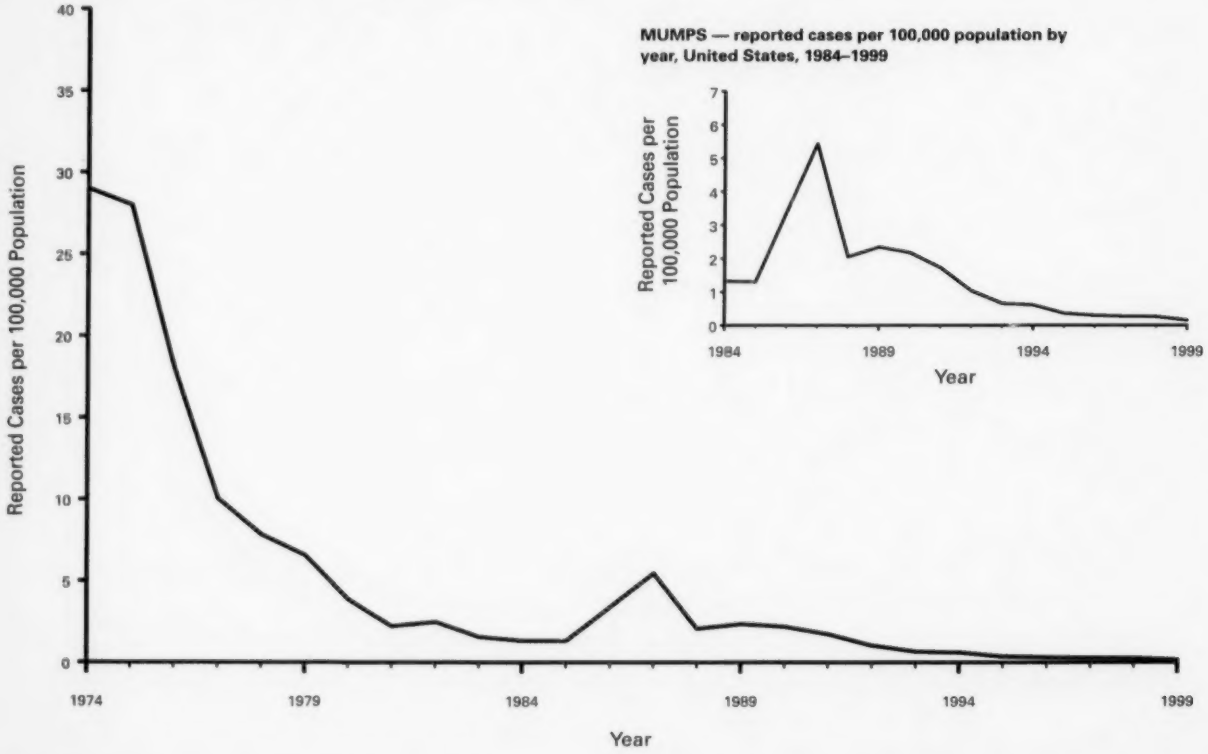
Measles incidence remained at <1 case/1,000,000 population for the third consecutive year, with 100 cases reported in 1999. Of these cases, 66% were imported from outside the United States. Measles is not currently endemic in this country.

MENINGOCOCCAL DISEASE — reported cases per 100,000 population by year, United States, 1969–1999



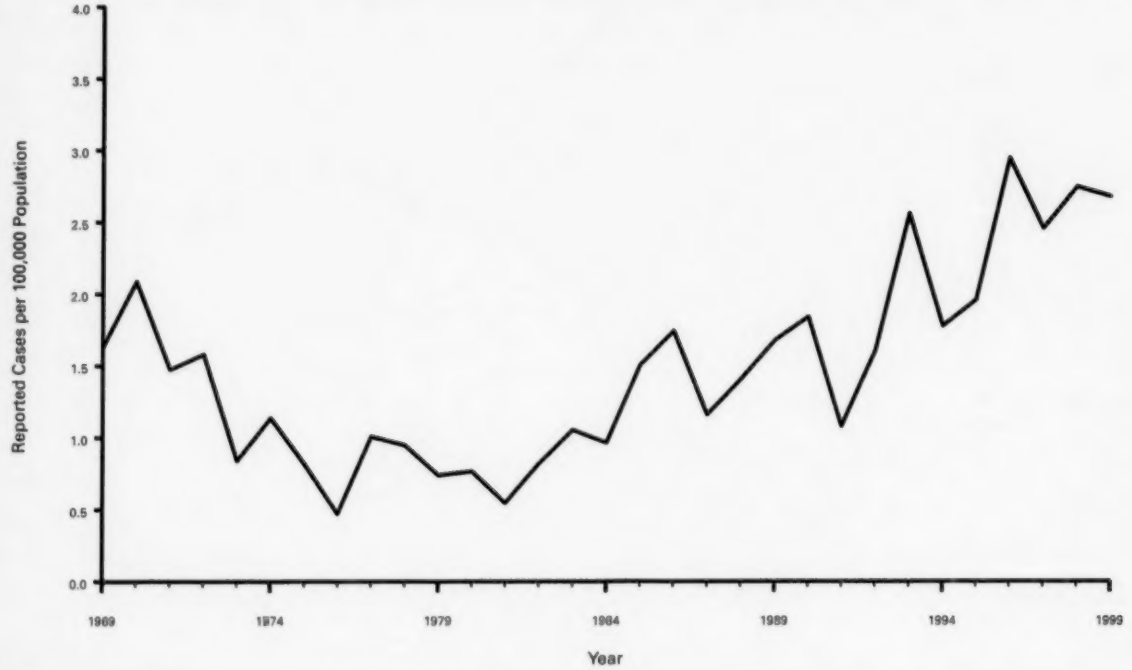
Meningococcal disease rates have remained stable since the 1960s, with 2,501 cases reported in 1999. However, case fatality rates remain high; of the 1,091 patients with outcome reported in 1999, a total of 12.5% died. Serogroup information was reported for 36.7% of cases, with serogroups B, C, and Y each accounting for approximately one-third of these cases.

MUMPS — reported cases per 100,000 population by year, United States, 1974–1999



In 1999, a record low of 387 mumps cases was reported, meeting the *Healthy People 2000* objective of 500 cases per year.

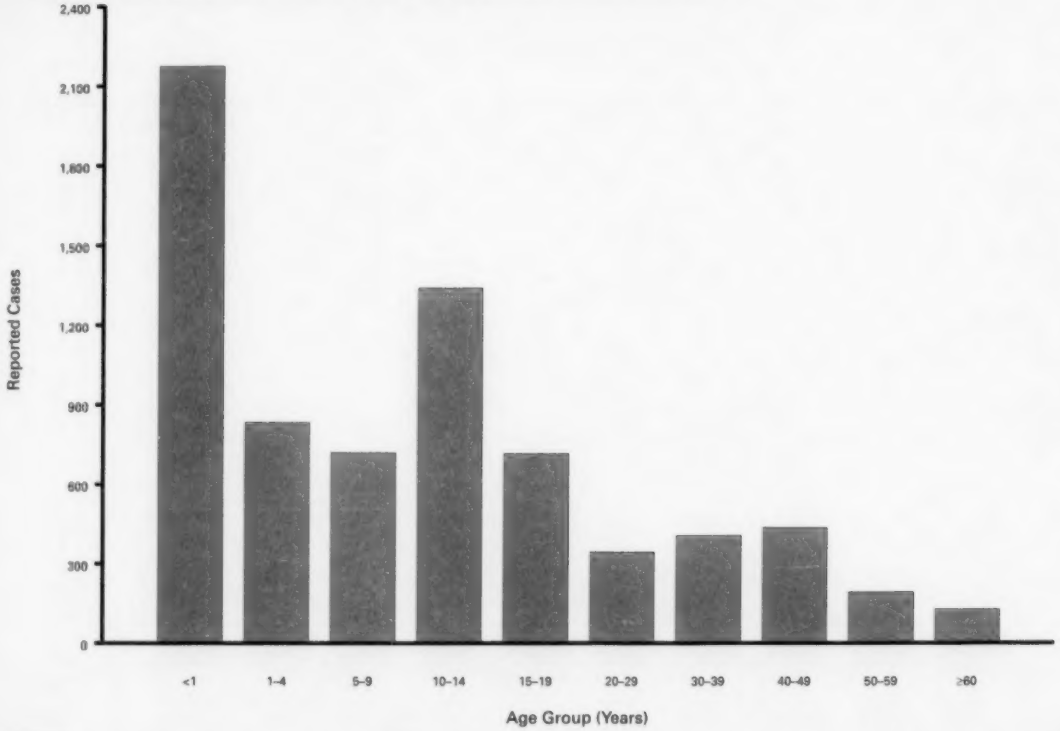
PERTUSSIS (whooping cough) — reported cases per 100,000 population by year, United States, 1969–1999



Pertussis epidemics occur every 3–4 years. In 1996, the highest number of pertussis cases (7,796) since 1967 was reported (incidence: 2.9 cases/100,000 population). Since 1993, the number of cases reported after each epidemic year has not returned to the baseline of the pre-epidemic year.

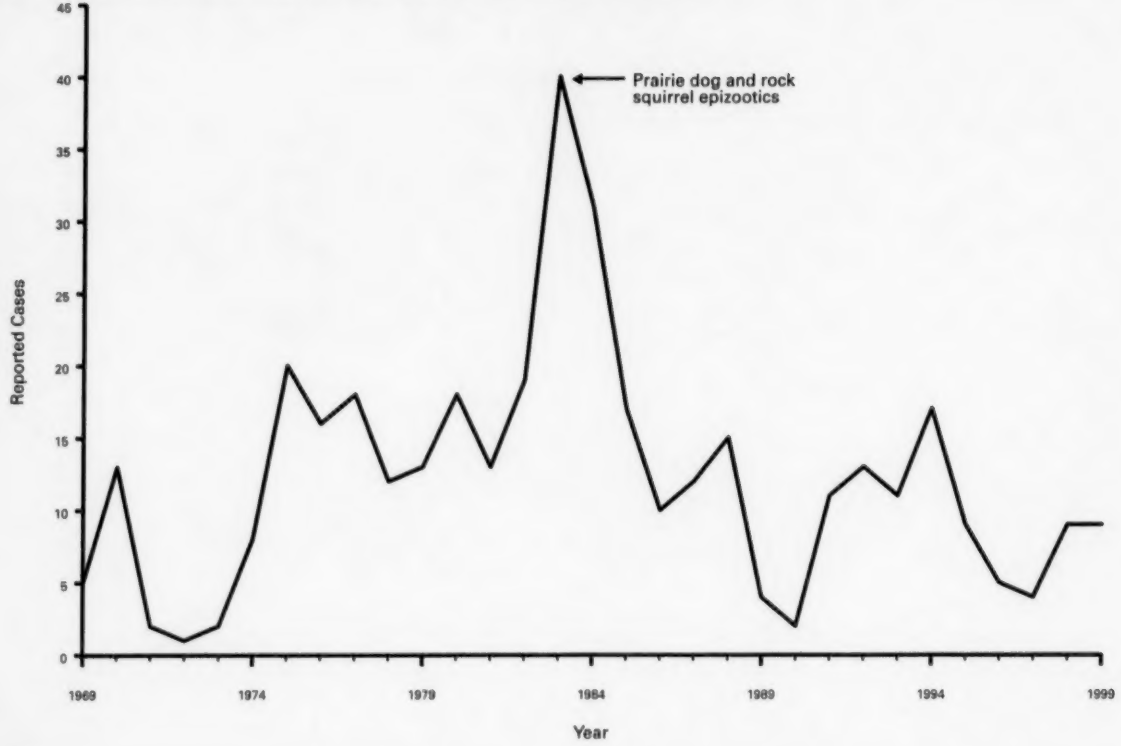
Note: A pertussis vaccine was first licensed in 1949.

PERTUSSIS (whooping cough) — reported cases by age group, United States, 1999



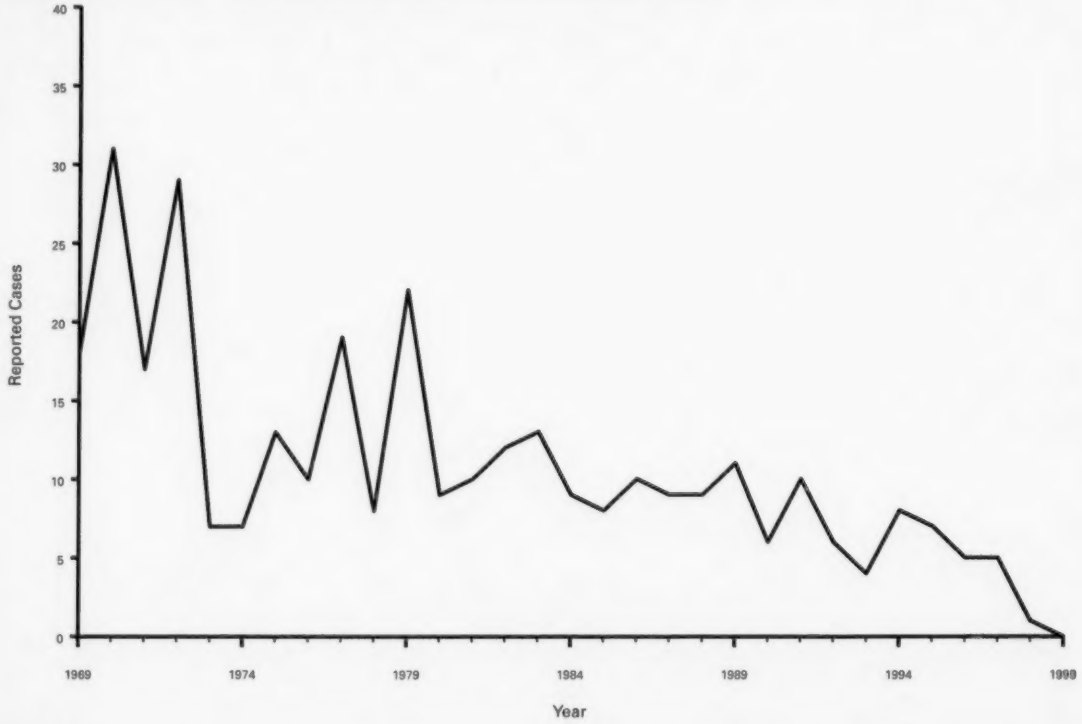
Most reported cases of pertussis continue to occur among children aged <1 year, but cases among adolescents and adults are increasingly reported to CDC. In 1999, a total of 49% of all reported cases occurred among persons aged ≥10 years. The proportion of reported cases among persons aged ≥10 years was 24% during 1990–1992, 29% during 1993–1995, and 46% during 1996–1999.

PLAGUE — reported cases among humans, by year, United States, 1969–1999



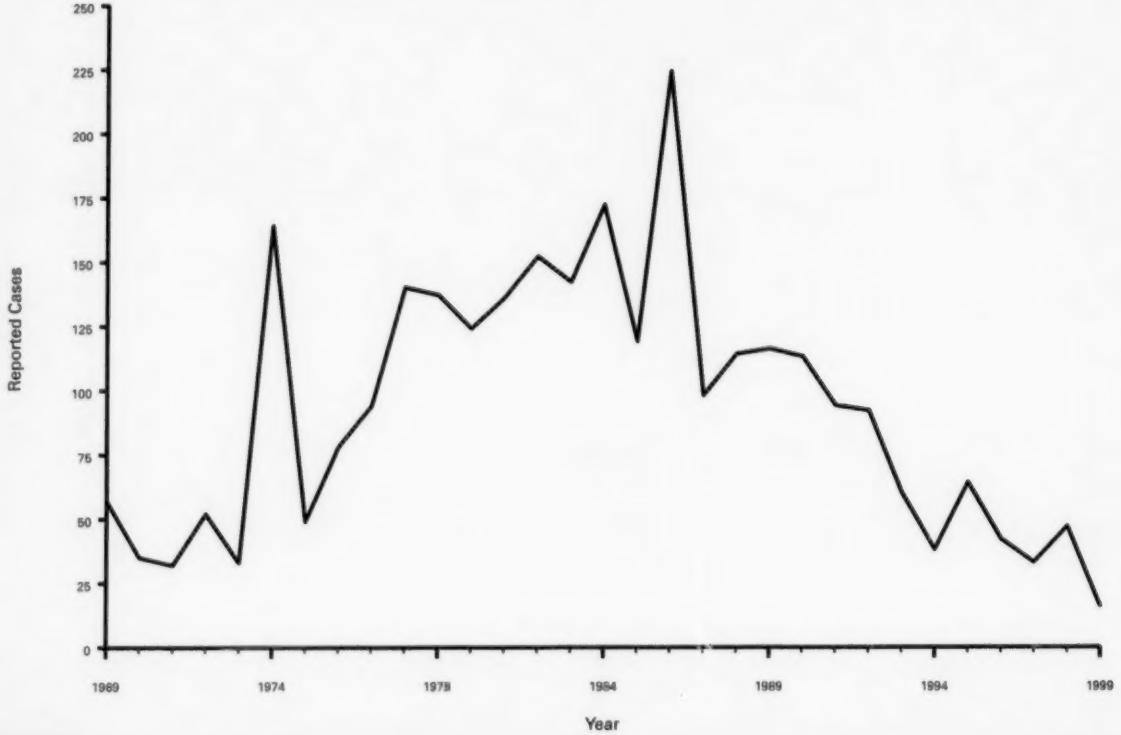
In 1999, nine laboratory-confirmed cases (one fatal) of human plague were identified (three in Colorado and six in New Mexico). All cases were naturally acquired from handling infected animals or being bitten by infectious wild rodent fleas.

POLIOMYELITIS (paralytic) — reported cases by year, United States, 1969–1999



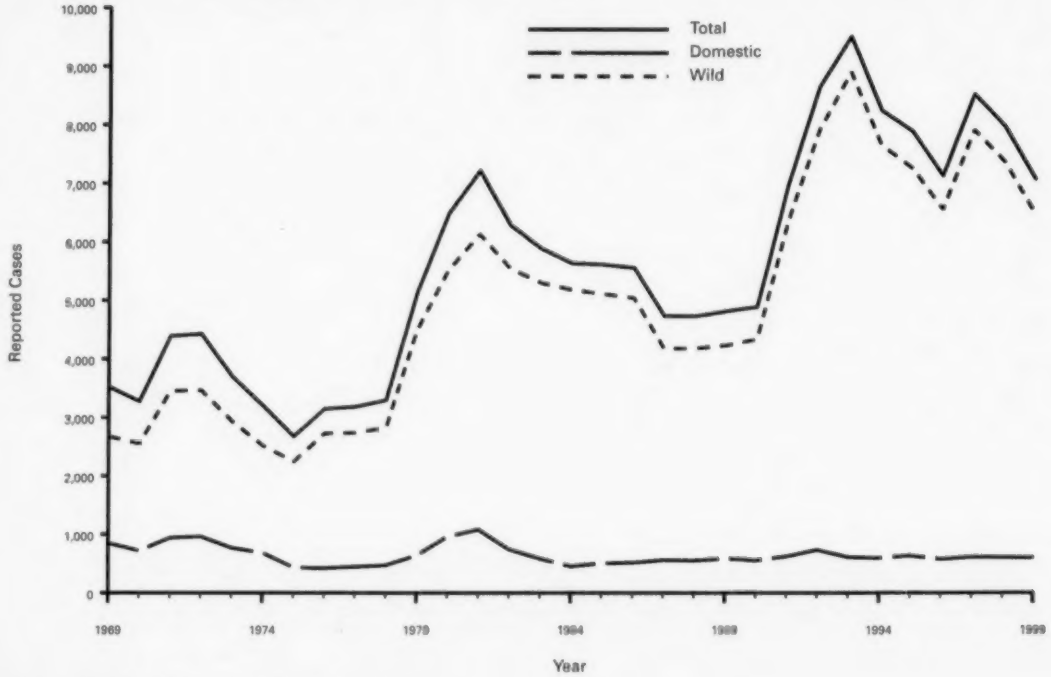
Data suggest a decline in vaccine-associated paralytic polio (VAPP) since the introduction of a sequential immunization schedule with inactivated poliovirus vaccine (IPV) and live, attenuated oral poliovirus vaccine (OPV) in 1997. This trend is expected to continue with the all-IPV schedule initiated in January 2000. Continued monitoring with additional observation time is required to confirm these preliminary findings because of potential delays in reporting.

PSITTACOSIS — reported cases by year, United States, 1969–1999



During the 1990s, the number of reported psittacosis cases steadily declined. This decline could reflect both improved diagnostic testing to distinguish *Chlamydia psittaci* from *C. pneumoniae* infections, as well as improved control measures for psittacosis among birds.

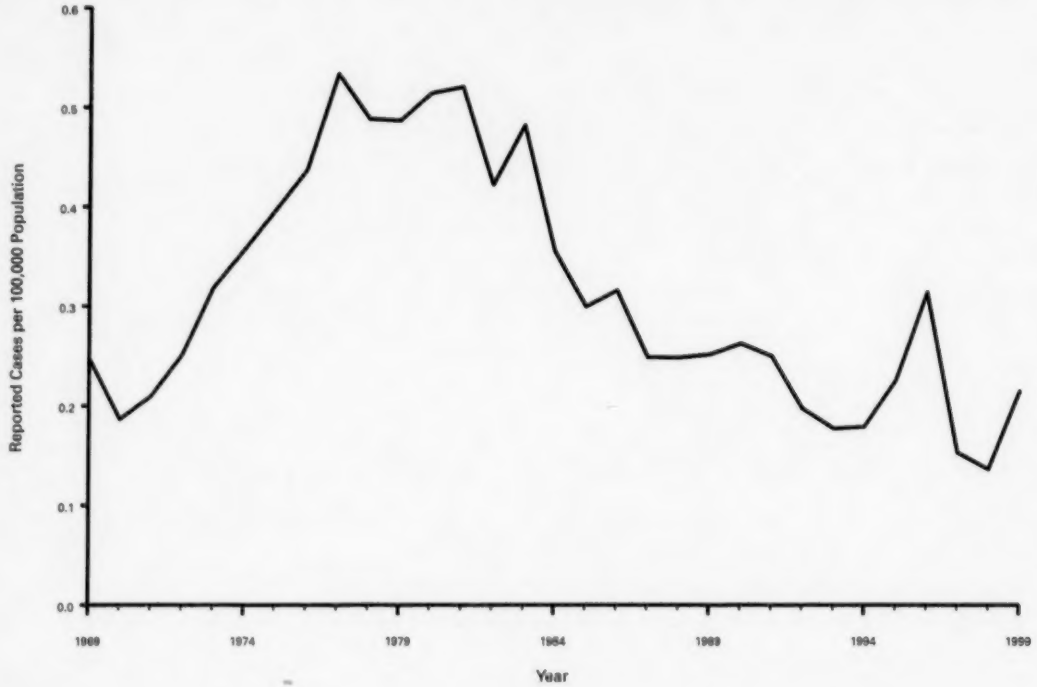
RABIES — reported wild and domestic animal cases by year,* United States and Puerto Rico, 1969–1999



*Data from the National Center for Infectious Diseases.

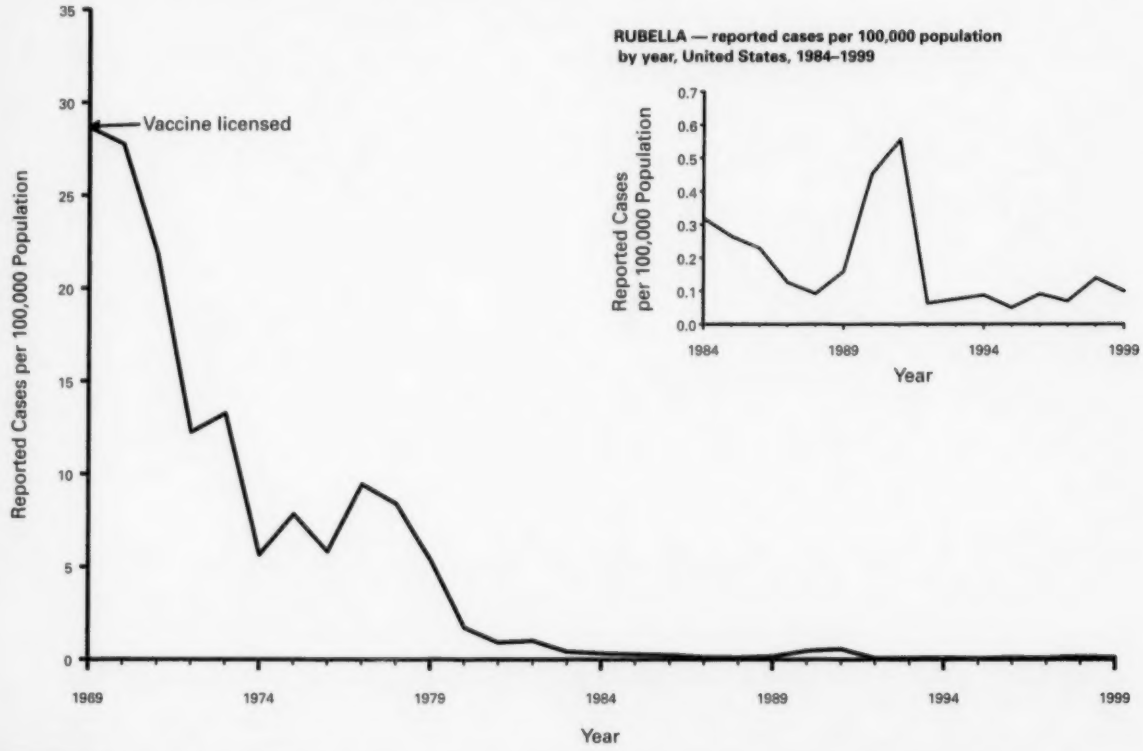
Periods of resurgence and decline of rabies incidence are primarily the result of cyclic reemergence, mainly among raccoons in the eastern United States. Wildlife populations increase and reach densities sufficient to support epizootic transmission of the disease, resulting in substantial increases in reported cases. As populations are decimated by these epizootics, numbers of reported cases decline until populations again reach levels to support epizootic transmission of the disease.

ROCKY MOUNTAIN SPOTTED FEVER — reported cases per 100,000 population by year, United States, 1969–1999



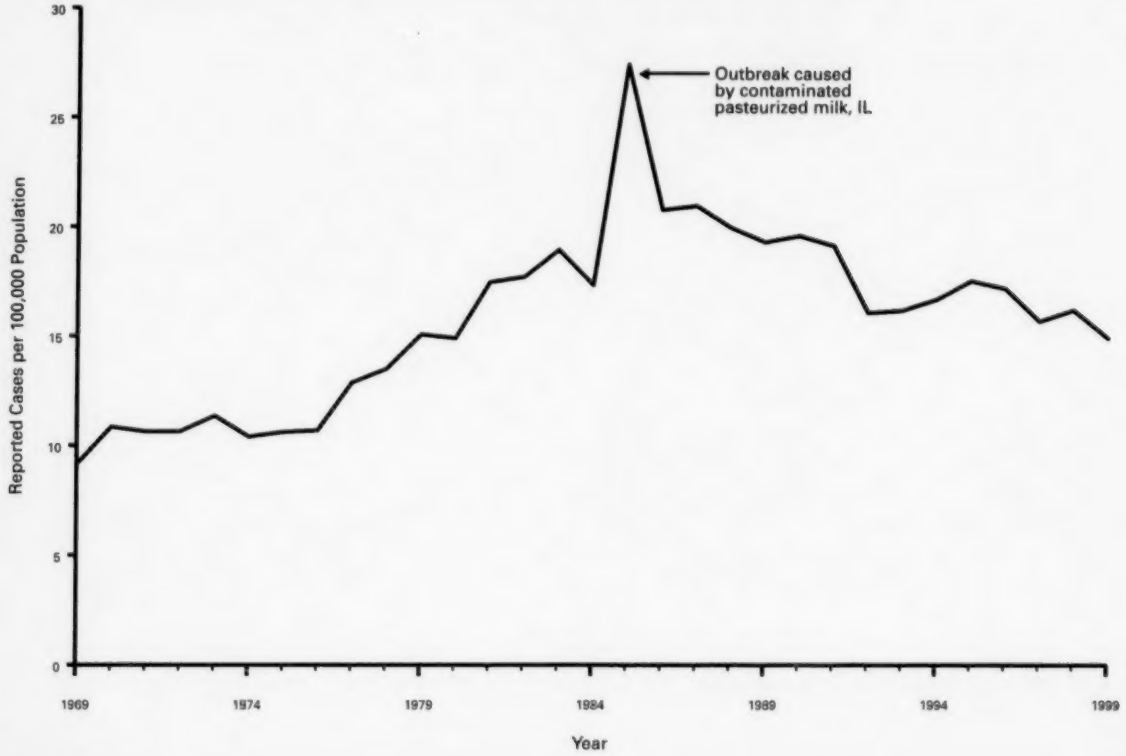
Changes in the number of reported cases of Rocky Mountain spotted fever could reflect alterations to surveillance algorithms for this and other tickborne diseases. Biological factors (e.g., changes in tick populations resulting from fluctuating environmental conditions) also could be involved.

RUBELLA — reported cases per 100,000 population by year, United States, 1969–1999



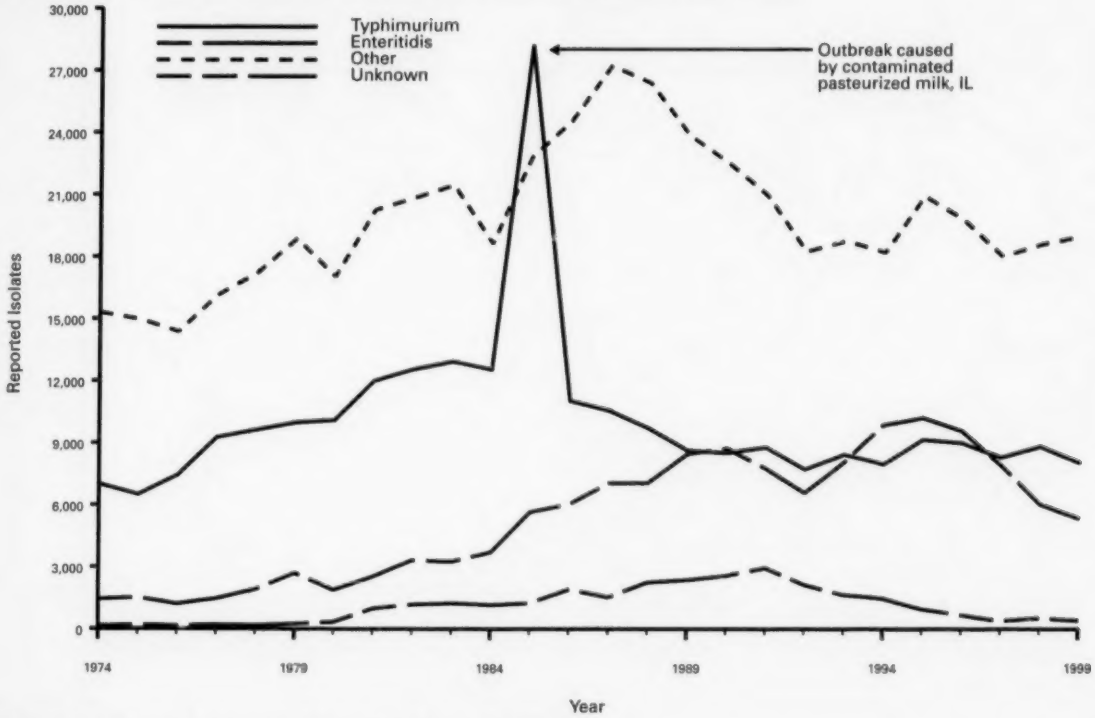
Since 1992, the incidence of rubella has continued to be low. In 1999, approximately 75% of cases occurred among Hispanics aged ≥15 years.

SALMONELLOSIS — reported cases per 100,000 population by year, United States, 1969–1999



In 1999, *Salmonella* serotypes Typhimurium and Enteritidis accounted for 41% of all reported laboratory-confirmed human salmonellosis cases.

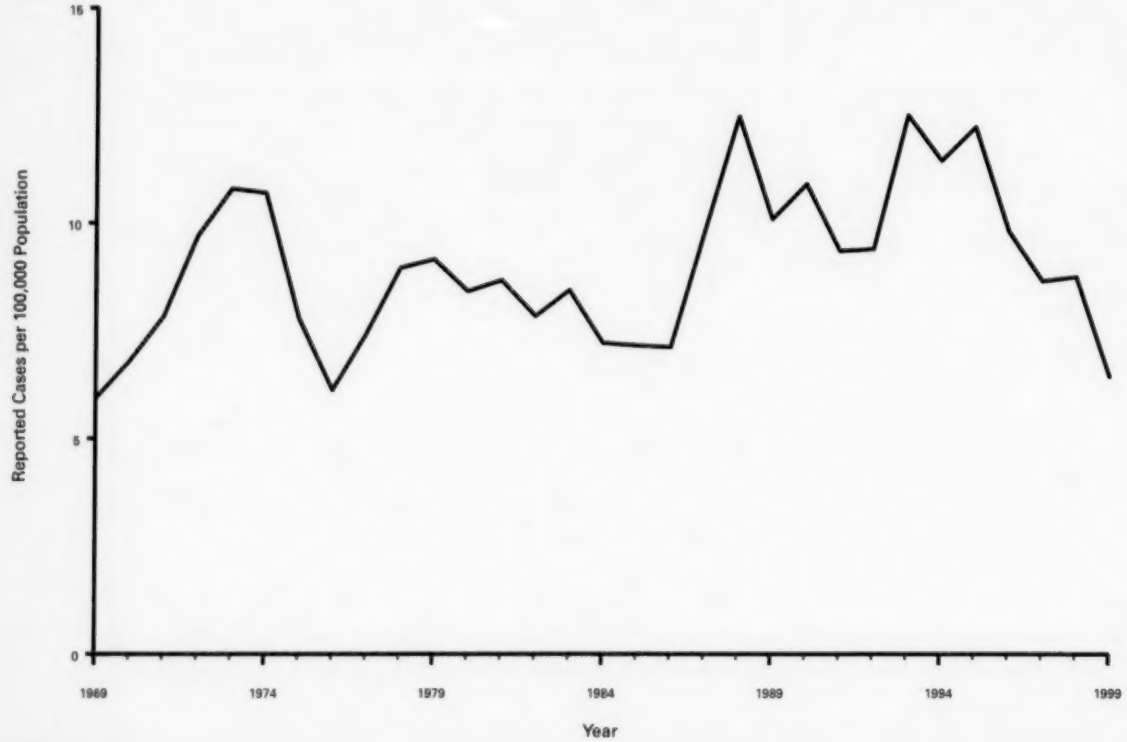
SALMONELLA — reported isolates by serotype and year,* United States, 1974–1999



*Data from Public Health Laboratory Information System (PHLIS).

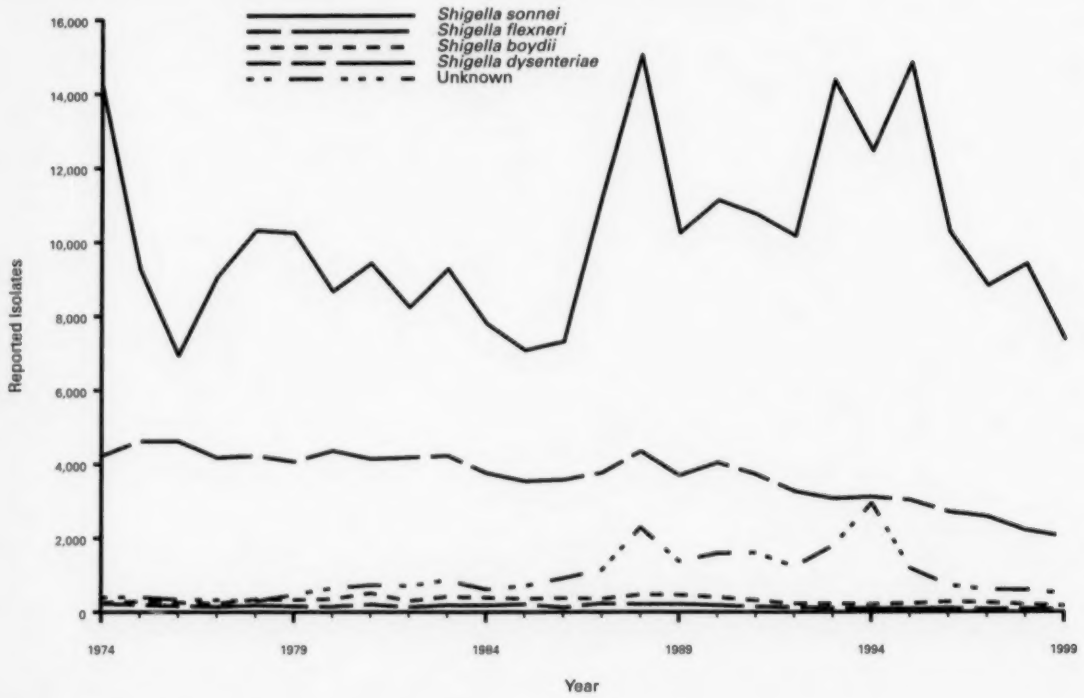
A multiple-resistant strain of *Salmonella* serotype Typhimurium accounts for approximately 30% of the Typhimurium isolates in the United States. The continued decline in *Salmonella* serotype Enteritidis could be associated with expanded farm-to-table control programs.

SHIGELLOSIS — reported cases per 100,000 population by year, United States, 1969–1999



Although the incidence of shigellosis has decreased in recent years, prolonged and extensive *Shigella sonnei* outbreaks continue to occur in child care settings.

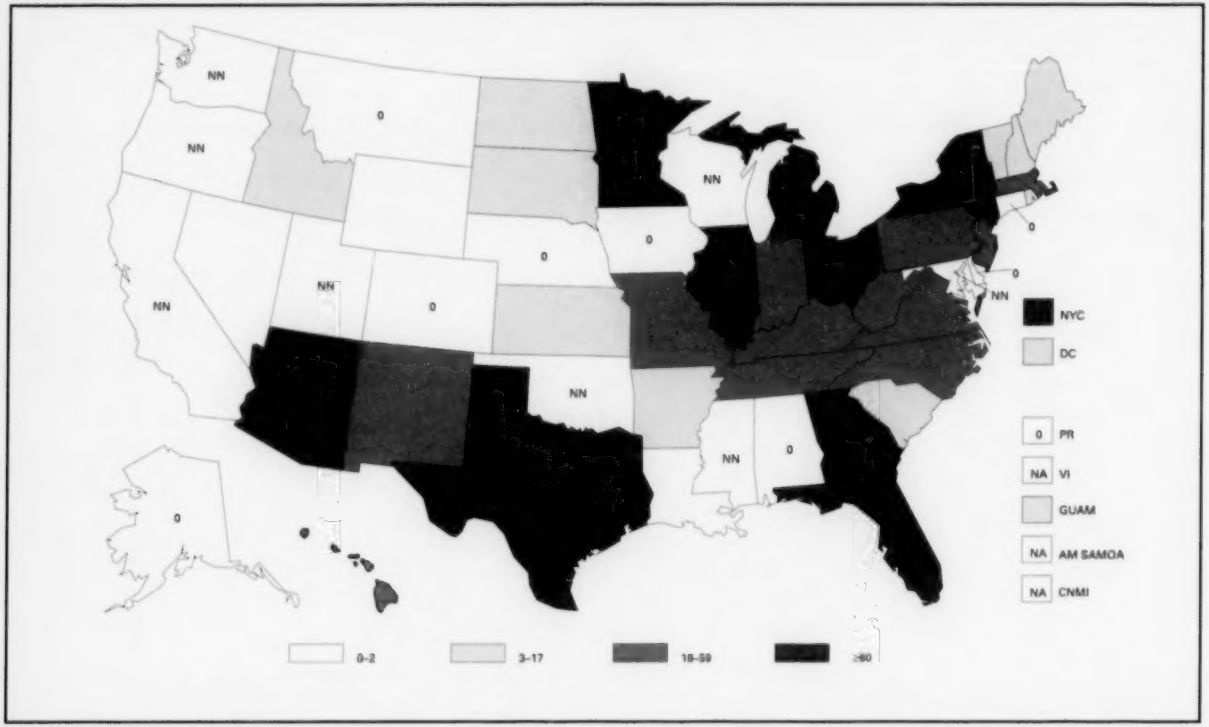
SHIGELLA — reported isolates by species and year,* United States, 1974–1999



*Data from Public Health Laboratory Information System (PHLIS).

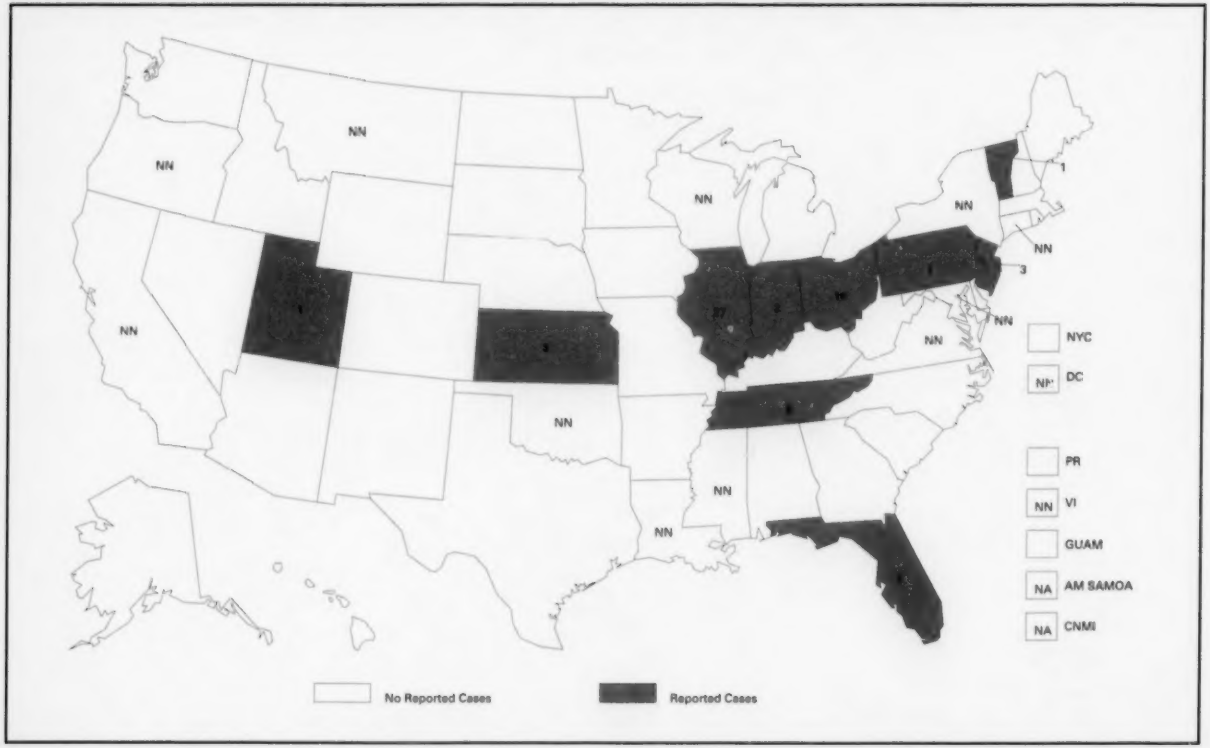
In recent years, reported isolations of *Shigella* have gradually decreased.

STREPTOCOCCAL DISEASE, INVASIVE, GROUP A — reported cases, United States and territories, 1999



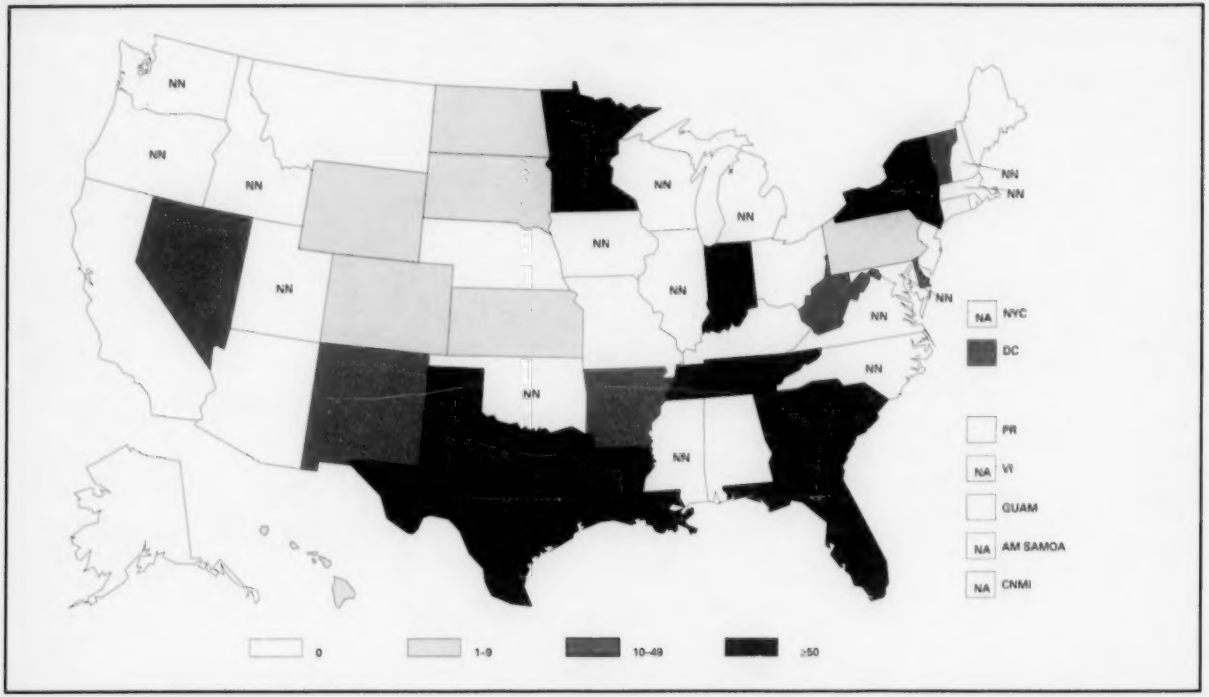
Invasive group A streptococcal disease has been nationally notifiable since 1995. In 1999, a total of 2,382 cases was reported from 38 states, territories, and cities that mandate public health reporting of this condition.

STREPTOCOCCAL TOXIC SHOCK SYNDROME — reported cases, United States and territories, 1999



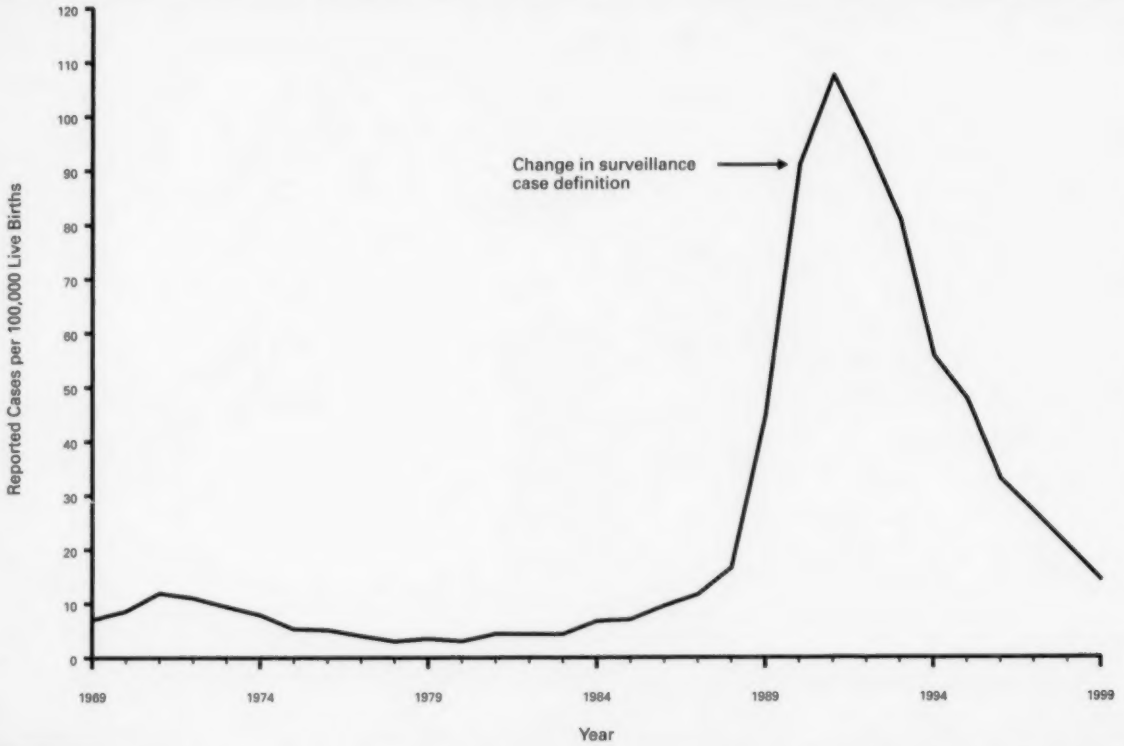
Streptococcal toxic shock syndrome has been nationally notifiable since 1995. In 1999, a total of 61 cases was reported to the National Notifiable Diseases Surveillance System (NNDSS).

STREPTOCOCCUS PNEUMONIAE, DRUG RESISTANT, INVASIVE DISEASE — reported cases, United States and territories, 1999



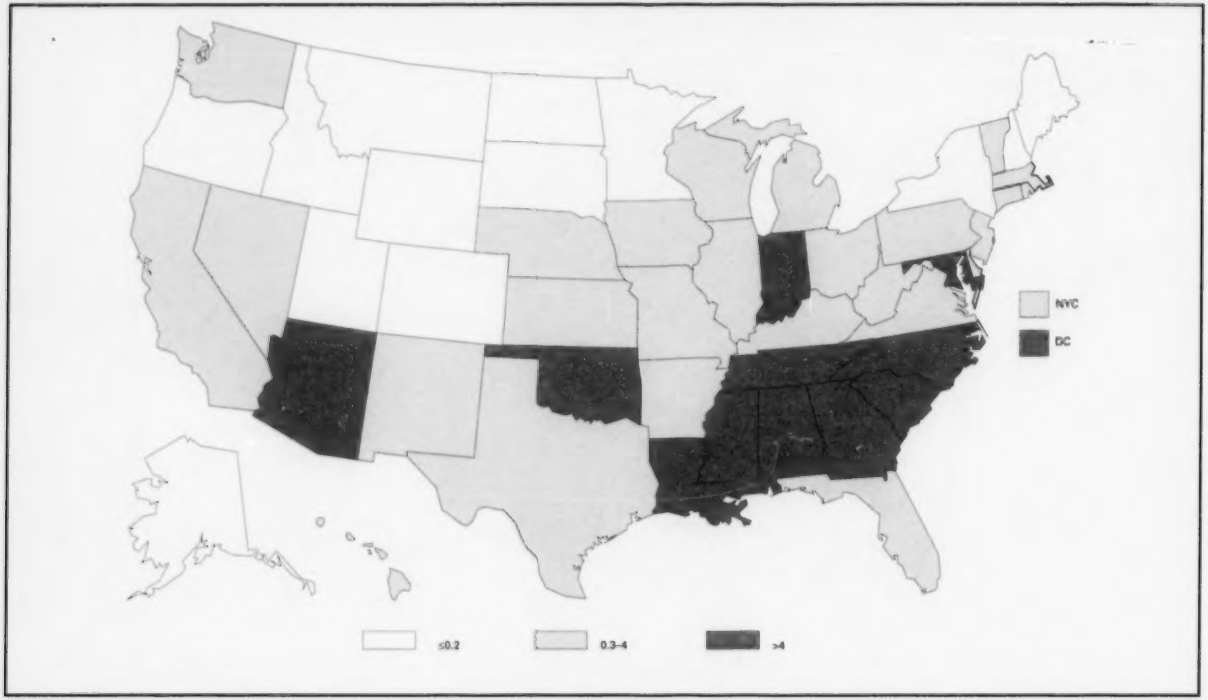
In 1999, approximately 60,000 cases of invasive pneumococcal infections occurred in the United States, with one in three cases caused by a strain resistant to at least one antibiotic normally used to treat these infections (Active Bacterial Core Surveillance, National Center for Infectious Diseases). In 2000, a new pneumococcal conjugate vaccine (Prevnar™, marketed by Wyeth Lederle Vaccines) was licensed and recommended for children aged <5 years. This vaccine should reduce the number of pneumococcal infections, including most infections caused by drug-resistant strains.

SYPHILIS, CONGENITAL — reported cases per 100,000 live births among infants aged <1 year, United States, 1969–1999



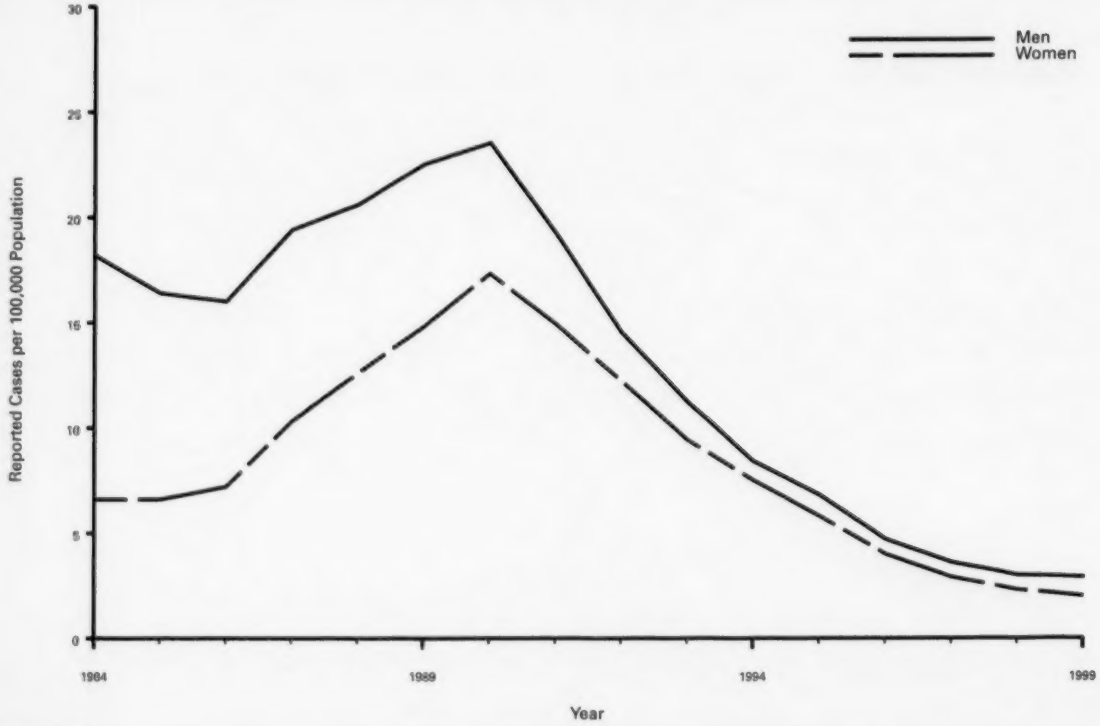
The rate of congenital syphilis decreased from 21.6 cases/100,000 live births in 1998 to 14.3/100,000 in 1999 (Division of Sexually Transmitted Diseases Prevention, National Center for HIV, STD, and TB Prevention).

SYPHILIS, PRIMARY AND SECONDARY — reported cases per 100,000 population, United States, 1999



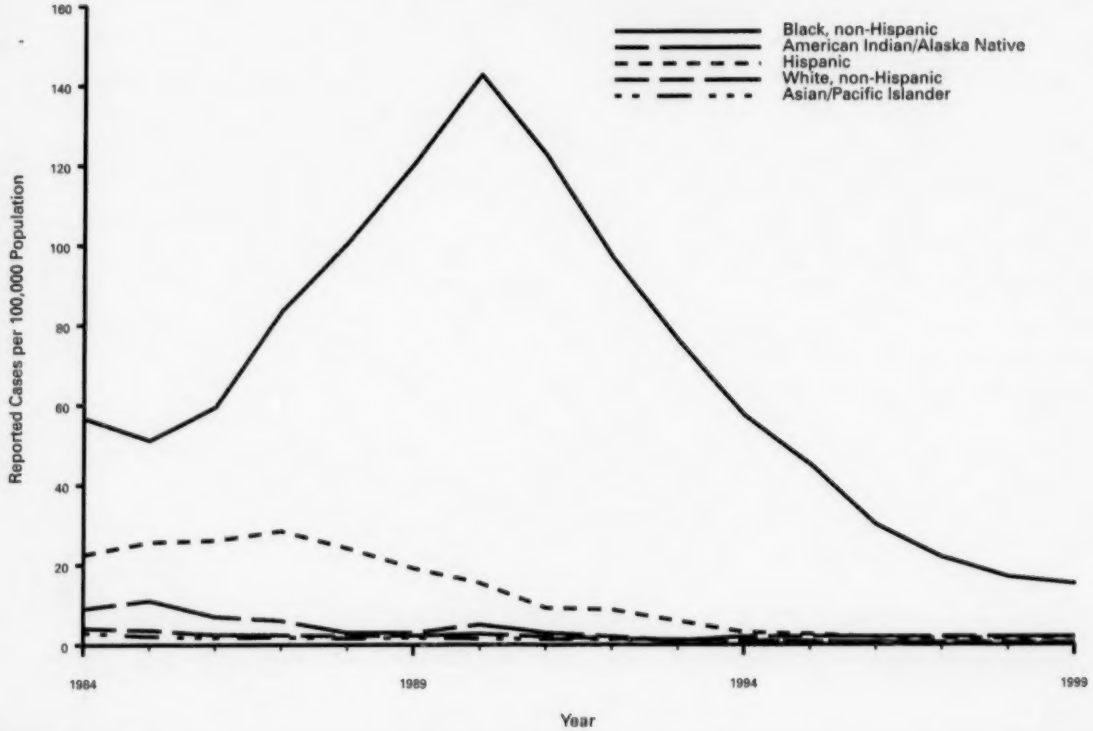
In 1999, the U.S. rate of primary and secondary syphilis was 2.5 cases/100,000 population, which is below the revised *Healthy People 2000* national objective of 4.0 cases/100,000 population. Thirty-nine states reported rates below the national objective, and 14 states reported ≤5 cases.

SYPHILIS, PRIMARY AND SECONDARY — reported cases per 100,000 population by sex, United States, 1984–1999



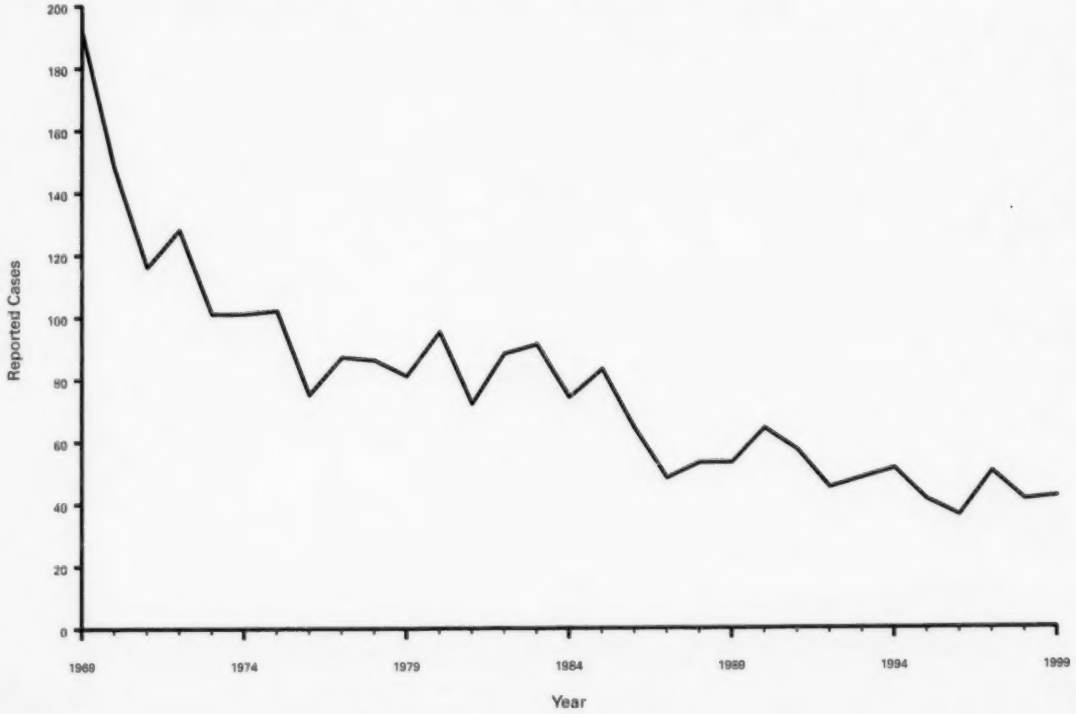
The reported U.S. rate of primary and secondary syphilis continues to decline, with 1999 rates among both males and females below the *Healthy People 2000* national objective of 4.0 cases/100,000 population. Rates decreased from 3.0 cases/100,000 in 1998 to 2.9 in 1999 among men and from 2.2 cases/100,000 in 1998 to 2.0 cases in 1999 among women.

SYPHILIS, PRIMARY AND SECONDARY — reported cases per 100,000 population by race and ethnicity, United States, 1984–1999



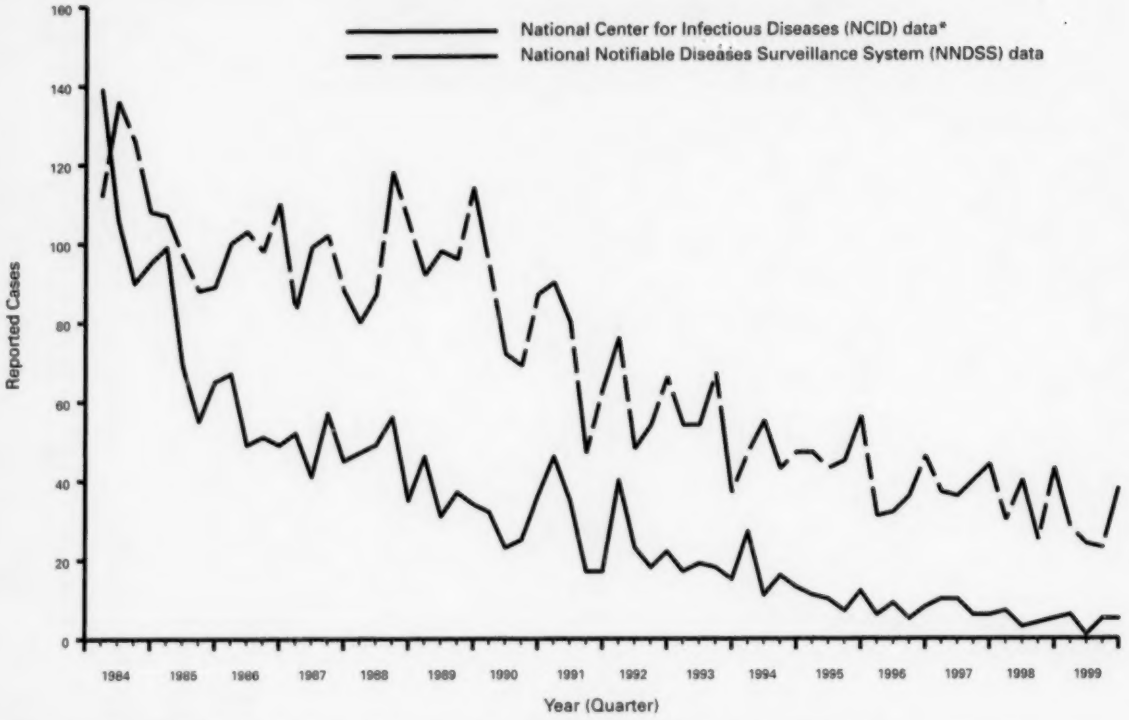
In 1999, primary and secondary syphilis rates declined or remained the same except among Hispanics. The reported rate among non-Hispanic blacks (15.2 cases/100,000 persons) decreased 10%during 1998 – 1999 but was 30 times greater than the rate among non-Hispanic whites.

TETANUS — reported cases by year, United States, 1969–1999



In 1999, a total of 40 cases of tetanus was reported. A shift has occurred in the age distribution of cases, with the percentage of cases among persons aged 25–59 years increasing in the past decade.

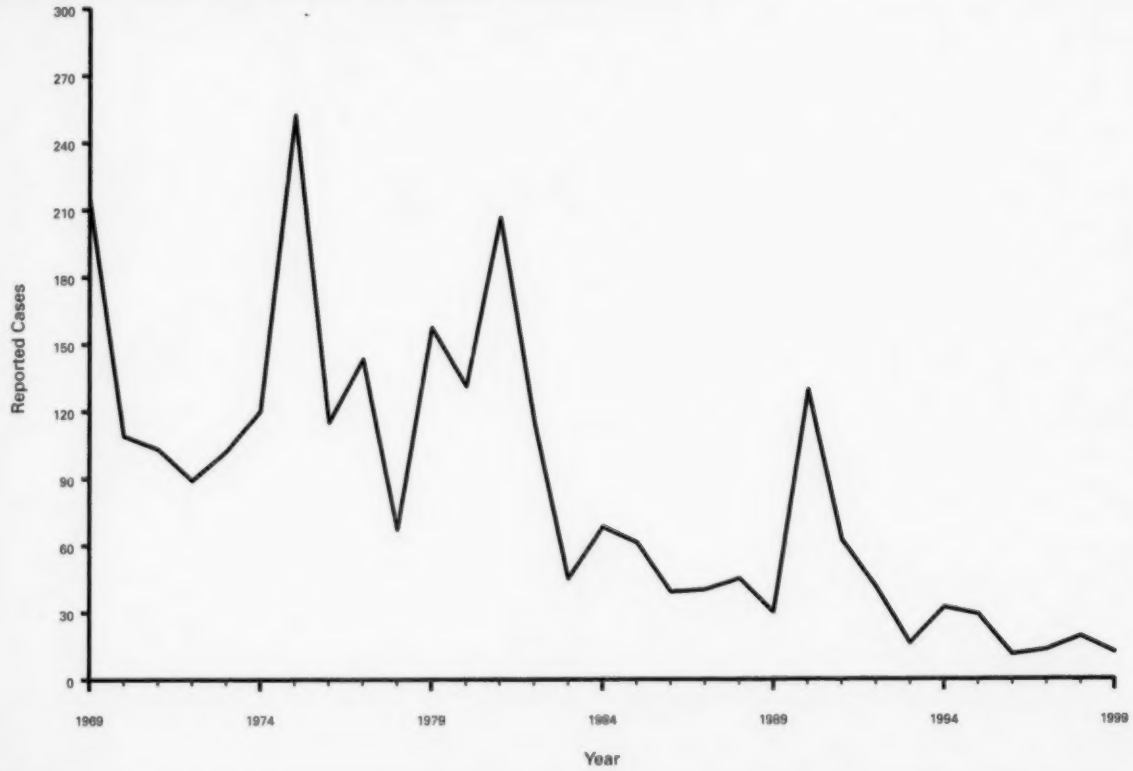
TOXIC-SHOCK SYNDROME (TSS) — reported cases by quarter, United States, 1984–1999



*Includes cases meeting the CDC definition for confirmed and probable cases for staphylococcal TSS.

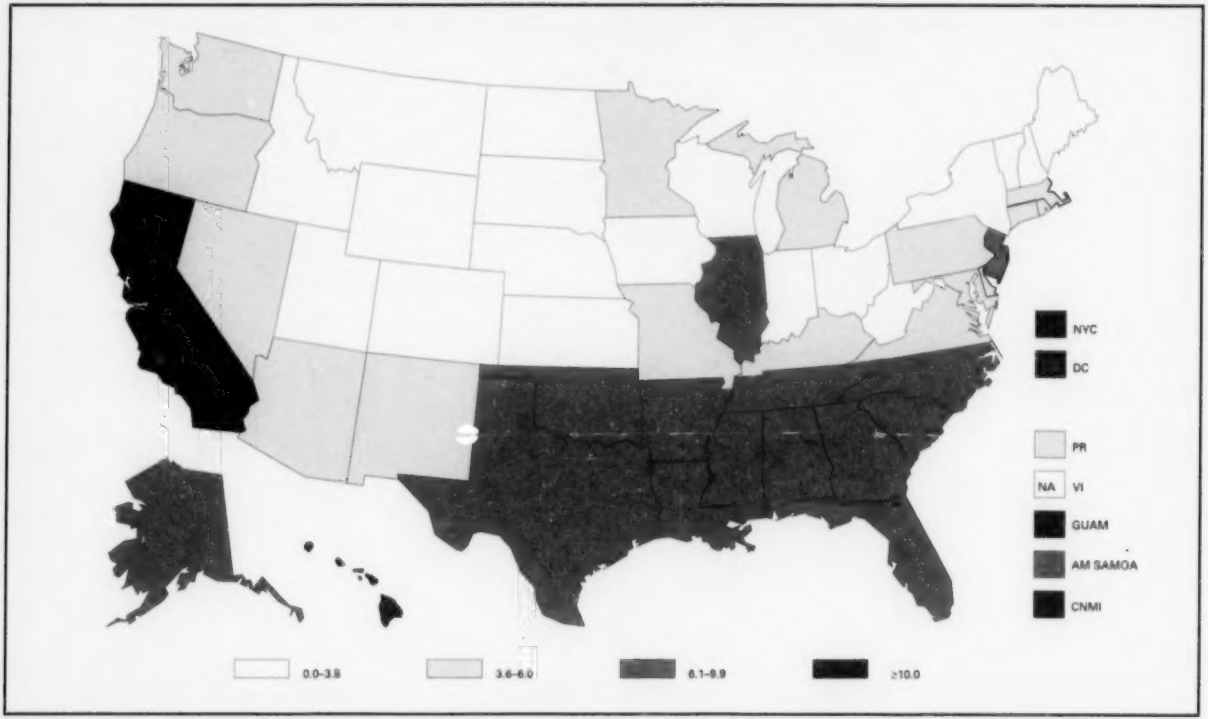
In 1999, a total of 17 cases of staphylococcal TSS was reported to NCID. Of these cases, nine (53%) persons had menstrual TSS.

TRICHINOSIS — reported cases by year, United States, 1969–1999



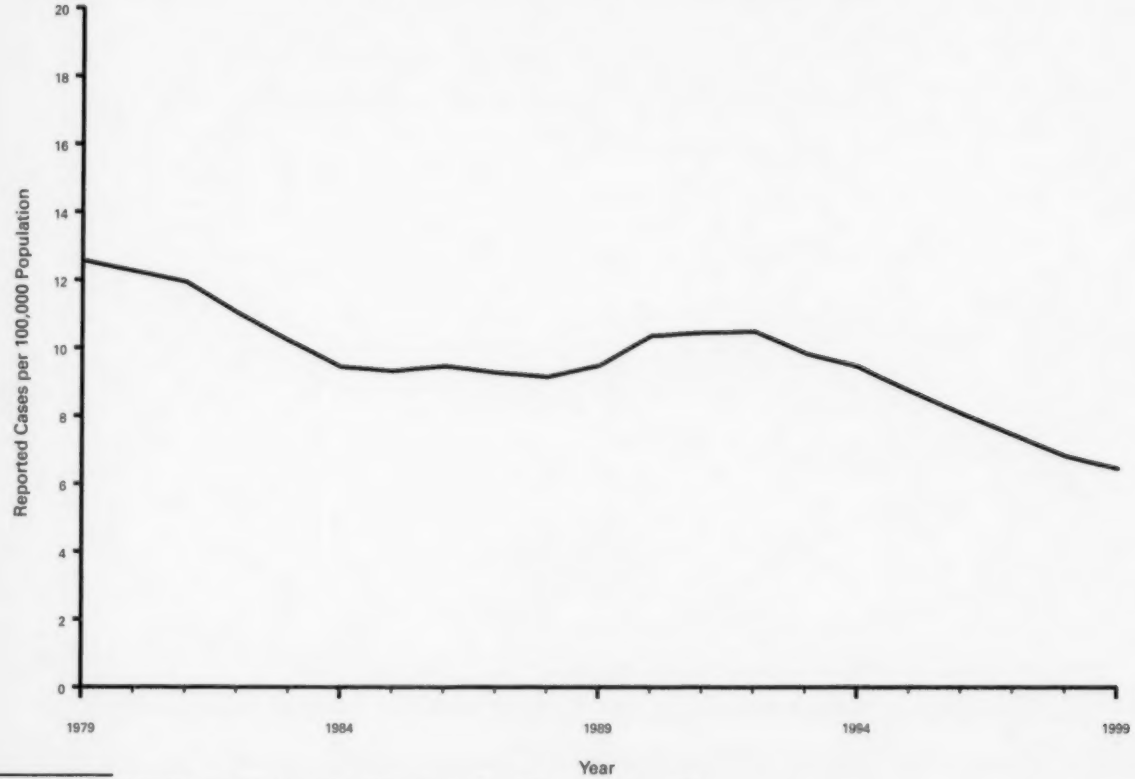
In 1999, a total of 12 cases of trichinosis was reported in the United States. Cases have declined in recent years, with numbers reported at <50 since 1993.

TUBERCULOSIS (TB) — reported cases per 100,000 population, United States and territories, 1999



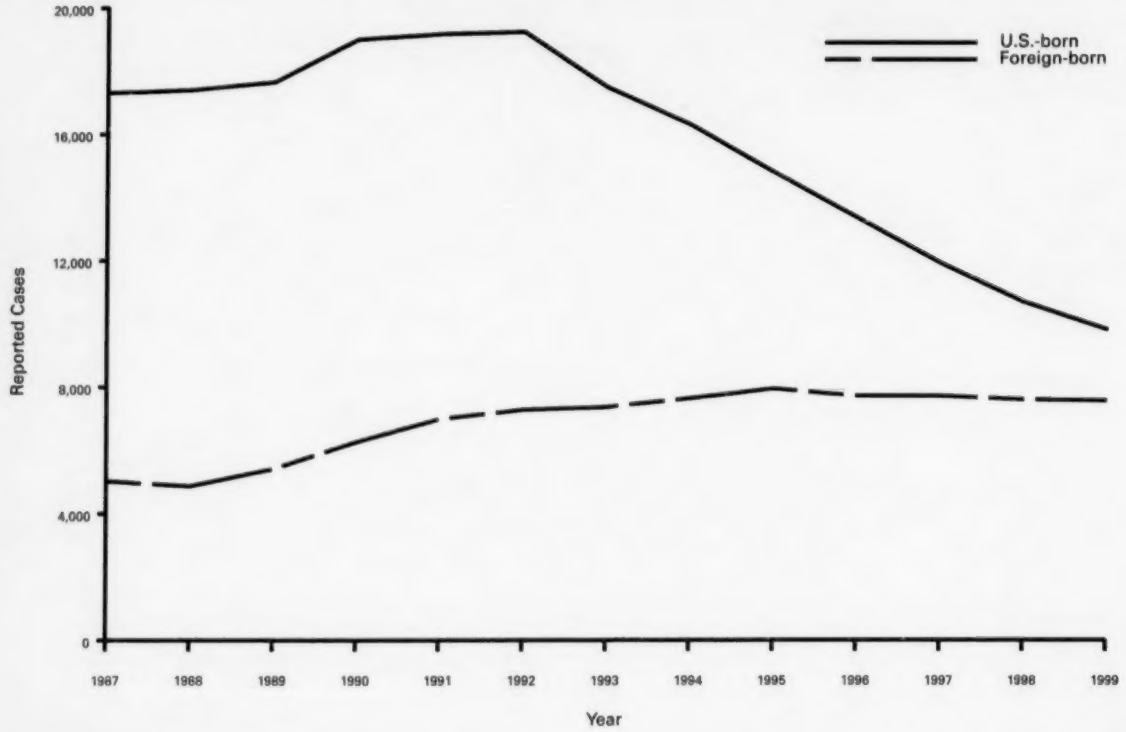
In 1999, a total of 17 states had TB rates of ≤3.5 cases/100,000 population, which is the interim (i.e., year 2000) incidence target for the elimination of TB by the year 2010.

TUBERCULOSIS (TB) — reported cases per 100,000 population by year, United States, 1979–1999



In 1999, a total of 17,531 TB cases was reported to CDC, representing a 4.5% decrease from 1998.

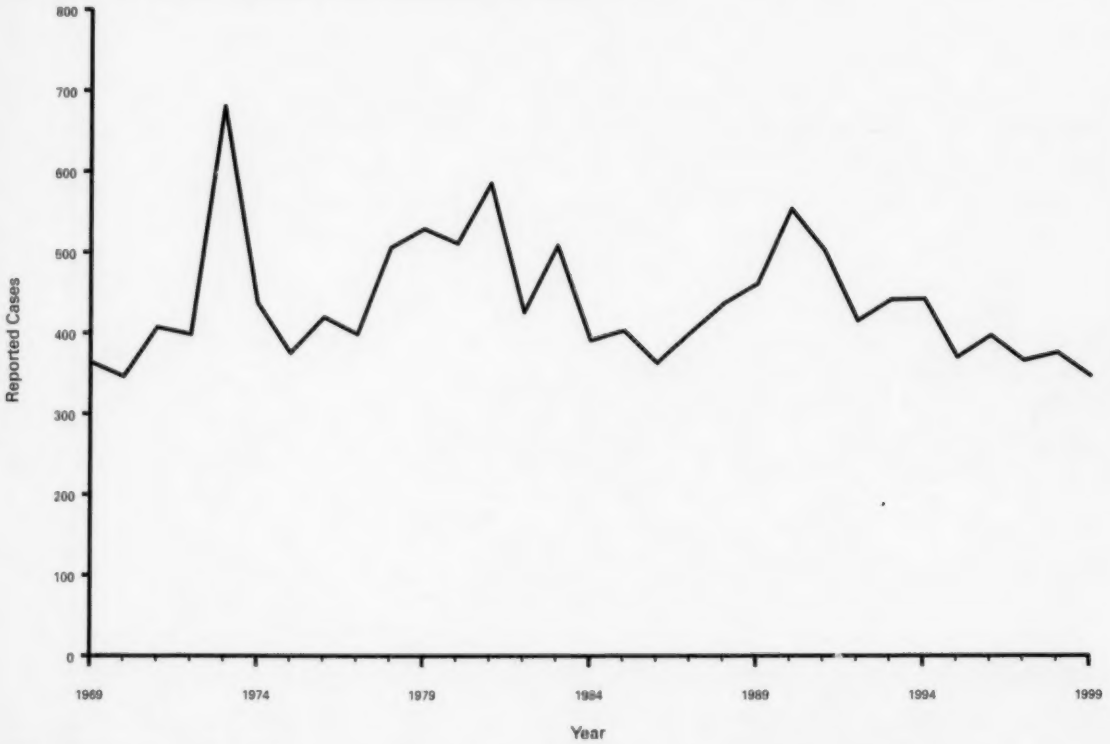
TUBERCULOSIS (TB) — reported cases among U.S.-born and foreign-born persons* by year, United States, 1987–1999



*In 1999, place of birth was unknown for 169 case-patients.

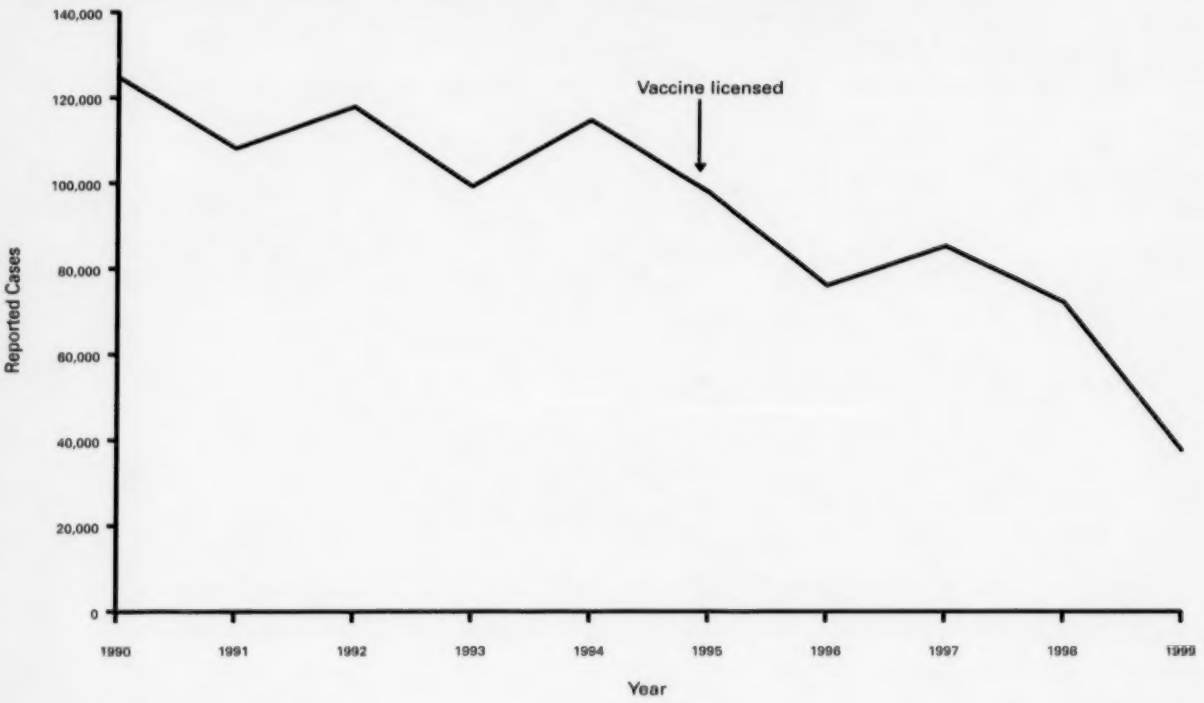
The number of TB cases among foreign-born persons in the United States increased from 22% (4,925 cases) of the total in 1986 to 43% (7,553 cases) of the total in 1999.

TYPHOID FEVER — reported cases by year, United States, 1969–1999



The recent discontinuation of a licensed typhoid fever vaccine and shortages of a second vaccine could cause an increase in preventable cases of typhoid fever among persons traveling internationally.

VARICELLA (Chickenpox) — reported cases from selected U.S. states* (n=7), 1990–1999



*Illinois, Massachusetts, Michigan, Missouri, Rhode Island, Texas, and West Virginia maintained adequate reporting by reporting cases constituting ≥5% of their birth cohort during 1990–1995 (National Immunization Program).

PART 3

Historical Summaries of Notifiable Diseases in the United States, 1968–1999

EXPLANATION OF SYMBOLS USED IN TABLES

No reported cases ..... —

TABLE 7. Reported incidence rates of notifiable diseases per 100,000 population, United States, 1989–1999

Disease	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
AIDS*	13.58	16.72	17.32	17.83	40.20	30.07	27.20	25.21	21.85	17.21	16.66
Amebiasis	1.34	1.38	1.23	1.21	1.21	1.20	†				
Anthrax	—	—	—	0.00	—	—	—	—	—	—	—
Aseptic meningitis	4.14	4.77	6.26	5.18	5.39	3.71	†				
Botulism, total (includes wound and unspecified)	0.04	0.04	0.05	0.04	0.04	0.06	0.04	0.05	0.05	0.04	0.06
Foodborne	0.01	0.01	0.01	0.00	0.01	0.02	0.01	0.01	0.02	0.01	0.01
Brucellosis	0.04	0.03	0.04	0.04	0.05	0.05	0.04	0.05	0.04	0.03	0.03
Chancroid	1.90	1.70	1.40	0.80	0.54	0.30	0.20	0.15	0.09	0.07	0.06
Chlamydia§	†						182.60	188.10	196.80	236.57	254.10
Cholera	—	0.00	0.01	0.04	0.00	0.02	0.01	0.01	0.01	0.01	0.00
Cryptosporidiosis				¶	†				1.12	1.61	0.92
Diphtheria	0.00	0.00	0.00	0.00	—	0.00	—	0.01	0.01	0.00	0.00
Encephalitis, primary	0.40	0.54	0.40	0.30	0.36	0.28	†				
Postinfectious	0.04	0.04	0.03	0.05	0.07	0.06	†				
Encephalitis, California serogroup viral	†									0.04	0.03
Eastern equine	†									0.00	0.00
St. Louis	†									0.01	0.00
Western equine	†									0.00	0.00
Escherichia coli O157:H7			¶			0.82	1.01	1.18	1.04	1.28	1.77
Gonorrhea	297.36	276.60	249.48	201.60	172.40	168.40	149.50	122.80	121.40	132.88	133.20
Granuloma inguinale	0.00	0.00	0.01	0.00	0.00	0.00	†				
Haemophilus influenzae, invasive disease	†		1.10	0.55	0.55	0.45	0.45	0.45	0.44	0.44	0.48
Hansen disease (leprosy)	0.07	0.08	0.06	0.07	0.07	0.05	0.06	0.05	0.05	0.05	0.04
Hepatitis A	14.43	12.64	9.67	9.06	9.40	10.29	12.13	11.70	11.22	8.59	6.25
Hepatitis B	9.43	8.48	7.14	6.32	5.18	4.81	4.19	4.01	3.90	3.80	2.82
Hepatitis C; non-A, non-B**	1.02	1.03	1.42	2.36	1.86	1.78	1.78	1.41	1.43	1.30	1.14
Hepatitis, unspecified	0.93	0.67	0.50	0.35	0.24	0.17	†				
Legionellosis	0.48	0.55	0.53	0.53	0.50	0.63	0.48	0.47	0.44	0.51	0.41
Leptospirosis	0.04	0.03	0.02	0.02	0.02	0.02	†				
Lyme disease	†		3.80	3.93	3.20	5.01	4.49	6.21	4.79	6.39	5.99
Lymphogranuloma venereum	0.06	0.10	0.19	0.10	0.10	0.10	†				
Malaria	0.51	0.52	0.51	0.43	0.55	0.47	0.55	0.68	0.75	0.60	0.61
Measles	7.33	11.17	3.82	0.88	0.12	0.37	0.12	0.20	0.06	0.04	0.04
Meningococcal disease	1.10	0.99	0.84	0.84	1.02	1.11	1.25	1.30	1.24	1.01	0.92
Mumps	2.34	2.17	1.72	1.03	0.66	0.60	0.35	0.29	0.27	0.25	0.14
Murine typhus fever	0.02	0.02	0.02	0.02	0.01	0.01	†				

TABLE 7. (*Continued*) Reported incidence rates of notifiable diseases per 100,000 population, United States, 1989–1999

Disease	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Pertussis (whooping cough)	1.67	1.84	1.08	1.60	2.55	1.77	1.97	2.94	2.46	2.74	2.67
Plague	0.00	0.00	0.00	0.01	0.00	0.01	0.00	0.01	0.01	0.00	0.00
Poliomyelitis, paralytic	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.01	0.00	—
Psittacosis	0.05	0.05	0.04	0.04	0.02	0.02	0.03	0.02	0.02	0.02	0.01
Rabies, human	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.01	0.00	—
Rheumatic fever, acute	0.13	0.09	0.12	0.06	0.08	0.09	†				
Rocky Mountain spotted fever	0.25	0.26	0.25	0.20	0.18	0.18	0.23	0.32	0.16	0.14	0.21
Rubella	0.16	0.45	0.56	0.06	0.07	0.09	0.05	0.10	0.07	0.13	0.10
Salmonellosis, excluding typhoid fever	19.26	19.54	19.10	16.04	16.15	16.64	17.66	17.15	15.86	16.17	14.89
Shigellosis	10.07	10.89	9.34	9.38	12.48	11.44	12.32	9.80	8.64	8.74	6.43
Syphilis, primary and secondary	18.07	20.10	17.26	13.70	10.40	8.10	6.30	4.29	3.19	2.61	2.50
Total, all stages	44.94	53.80	51.69	45.30	39.70	32.00	26.20	19.97	17.39	14.19	13.07
Tetanus	0.02	0.03	0.02	0.02	0.02	0.02	0.02	0.02	0.02	0.02	0.01
Toxic-shock syndrome	0.16	0.13	0.11	0.10	0.08	0.10	0.07	0.06	0.06	0.06	0.05
Trichinosis	0.01	0.05	0.02	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.00
Tuberculosis	9.46	10.33	10.42	10.46	9.82	9.36	8.70	8.04	7.42	6.79	6.43
Tularemia	0.06	0.06	0.08	0.06	0.05	0.04	†				
Typhoid fever	0.19	0.22	0.20	0.16	0.17	0.17	0.14	0.15	0.14	0.14	0.13
Varicella (chickenpox)††	121.77	120.06	135.82	176.54	118.54	135.76	118.11	44.13	93.55	70.28	44.56
Yellow fever	—	—	—	—	—	—	—	0.00	—	—	0.00

* Acquired immunodeficiency syndrome (AIDS).
† No longer nationally notifiable.
§ Chlamydia refers to genital infections caused by *C. trachomatis*.
¶ Not previously nationally notifiable.
** Anti-HCV (hepatitis C virus) antibody test became available May 1990.
†† Not nationally notifiable.

Note: Rates <0.01 after rounding are listed as 0.00. Data in the *MMWR Summary of Notifiable Diseases, United States* might not match data in other CDC surveillance reports because of differences in the timing of reports, the source of the data, and the use of different case definitions.

TABLE 8. Reported cases of notifiable diseases, United States, 1992–1999

Disease	1992	1993	1994	1995	1996	1997	1998	1999
AIDS	45,472	103,691	78,279	71,547	66,885	58,492	46,521	45,104*
Amebiasis	2,942	2,970	2,983			†		
Anthrax	1	—	—	—	—	—	—	—
Aseptic meningitis	12,223	12,848	8,932			†		
Botulism, total (includes wound and unspecified)	91	97	143	97	119	132	116	154
Foodborne	21	27	50	24	25	31	22	23
Infant	66	65	85	54	80	79	65	92
Brucellosis	105	120	119†	98	112	98	79	82
Chancroid	1,898	1,399	773	606	386	243	189	143§
Chlamydia¶		**		477,638	498,884	526,671	604,420	656,721§
Cholera	103	18	39	23	4	6	17	6
Cryptosporidiosis		**				2,566	3,793	2,361
Diphtheria	4	—	2	—	2	4	1	1
Encephalitis, primary	774	919	717			†		
Postinfectious	129	170	143			†		
Encephalitis, California serogroup viral				**			97	70
Eastern equine				**			4	5
St. Louis				**			24	4
Western equine				**			—	1
Escherichia coli O157:H7		**	1,420	2,139	2,741	2,565	3,161	4,513
Gonorrhea	501,409	439,673	418,068	392,848	325,883	324,907	355,642	360,076§
Granuloma inguinale	6	19	3			†		
Haemophilus influenzae, invasive disease	1,412	1,419	1,174	1,180	1,170	1,162	1,194	1,309
Hansen disease (leprosy)	172	187	136	144	112	122	108	108
Hepatitis A	23,112	24,238	26,796	31,582	31,032	30,021	23,229	17,047
Hepatitis B	16,126	13,361	12,517	10,805	10,637	10,416	10,258	7,694
Hepatitis C; non-A, non-B††	6,010	4,786	4,470	4,576	3,716	3,816	3,518	3,111
Hepatitis, unspecified	894	627	444			†		
Legionellosis	1,339	1,280	1,615	1,241	1,198	1,163	1,355	1,108
Leptospirosis	54	51	38			†		
Lyme disease	9,895	8,257	13,043	11,700	16,455	12,801	16,801	16,273
Lymphogranuloma venereum	302	285	235			†		

TABLE 8. (*Continued*) Reported cases of notifiable diseases, United States, 1992–1999

Disease	1992	1993	1994	1995	1996	1997	1998	1999
Malaria	1,087	1,411	1,229	1,419	1,800	2,001	1,611	1,666
Measles	2,237	312	963	309	508	138	100	100
Meningococcal disease	2,134	2,637	2,886	3,243	3,437	3,308	2,725	2,501
Mumps	2,572	1,692	1,537	906	751	683	666	387
Murine typhus fever	29	25	†	†	†	†	†	†
Pertussis (whooping cough)	4,083	6,586	4,617	5,137	7,796	6,564	7,405	7,283
Plague	13	10	17	9	5	4	9	9
Poliomyelitis, paralytic[11]	6	4	8	7	5	5	1	—
Psittacosis	92	60	38	64	42	33	47	16
Rabies, animal	8,589	9,377	8,147	7,811	6,982	8,105	7,259	6,730
Rabies, human	1	3	6	5	3	2	1	—
Rheumatic fever, acute	75	112	112	†	†	†	†	†
Rocky Mountain spotted fever	502	456	465	590	831	409	366	579
Rubella	160	192	227	128	238	181	364	267
Rubella, congenital syndrome	11	5	7	6	4	5	7	9
Salmonellosis, excluding typhoid fever	40,912	41,641	43,323	45,970	45,471	41,901	43,694	40,596
Shigellosis	23,931	32,198	29,769	32,080	25,978	23,117	23,626	17,521
Syphilis, primary and secondary	33,973	26,498	20,627	16,500	11,387	8,550	6,993	6,657[§]
Total, all stages	112,581	101,259	81,696	68,953	52,976	46,540	37,977	35,628[§]
Tetanus	45	48	51	41	36	50	41	40
Toxic-shock syndrome	244	212	192	191	145	157	138	113
Trichinosis	41	16	32	29	11	13	19	12
Tuberculosis	26,673	25,313	24,361	22,860	21,337	19,851	18,361	17,531[¶¶]
Tularemia	159	132	96	†	†	†	†	†
Typhoid fever	414	440	441	369	396	385	375	346
Varicella (chickenpox)***	158,364	134,722	151,219	120,624	83,511	98,727	82,455	46,016
Yellow fever	†††	†††	†††	†††	1	—	—	1

* Total number of acquired immunodeficiency syndrome (AIDS) cases reported to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP) through December 31, 1999.
† No longer nationally notifiable.
§ Cases were updated through the Division of Sexually Transmitted Diseases Prevention, NCHSTP, as of August 8, 2000.
¶ Chlamydia refers to genital infections caused by *C. trachomatis*.
** Not previously nationally notifiable.
†† Anti-HCV (hepatitis C virus) antibody test was available as of May 1990.
§§ Numbers might not reflect changes based on retrospective case evaluations or late reports (see *MMWR* 1986;35:180-2).
¶¶ Cases were updated through the Division of Tuberculosis Elimination, NCHSTP, as of May 3, 2000 .
*** Varicella was taken off the nationally notifiable disease list in 1991. Many states continue to report these cases to CDC.
††† Last indigenous case of yellow fever reported in 1911; last imported case reported in 1999.

Note: Data in the *MMWR Summary of Notifiable Disease, United States* might not match data in other CDC surveillance reports because of differences in the timing of reports, the source of the data, and the use of different case definitions.

TABLE 9. Reported cases of notifiable diseases, United States, 1984–1991

Disease	1984	1985	1986	1987	1988	1989	1990	1991
AIDS*	4,445	8,249	12,932	21,070	31,001	33,722	41,595	43,672
Amebiasis	5,252	4,433	3,532	3,123	2,860	3,217	3,328	2,969
Anthrax	1	—	—	1	2	—	—	—
Aseptic meningitis	8,326	10,619	11,374	11,487	7,234	10,274	11,852	14,526
Botulism, total (includes wound and unspecified)	123	122	109	82	84	89	92	114
Foodborne	†	49	23	17	28	23	23	27
Infant	†	70	79	59	50	60	65	81
Brucellosis	131	153	106	129	96	95	82	104
Chancroid	666	2,067	3,756	4,998	5,001	4,692	4,212	3,476
Cholera	1	4	23	6	8	—	6	26
Diphtheria	1	3	—	3	2	3	4	5
Encephalitis, primary	1,257	1,376	1,302	1,418	882	981	1,341	1,021
Postinfectious§	108	161	124	121	121	88	105	82
Gonorrhea	878,556	911,419	900,868	780,905	719,536	733,151	690,169	620,478
Granuloma inguinale	30	44	61	22	11	7	97	29
Hansen disease (leprosy)	290	361	270	238	184	163	198	154
Hepatitis A	22,040	23,210	23,430	25,280	28,507	35,821	31,441	24,378
Hepatitis B	26,115	26,611	26,107	25,916	23,177	23,419	21,102	18,003
Hepatitis C; non-A, non-B	3,871	4,184	3,634	2,999	2,619	2,529	2,553	3,582
Hepatitis, unspecified	5,531	5,517	3,940	3,102	2,470	2,308	1,671	1,260
Legionellosis	750	830	990	1,038	1,086	1,190	1,370	1,317
Leptospirosis	40	57	41	43	54	93	77	58
Lymphogranuloma venereum	170	226	396	303	185	189	277	471
Malaria	1,007	1,049	1,123	944	1,099	1,277	1,292	1,278
Measles	2,587	2,822	6,282	3,655	3,396	18,193	27,786	9,643
Meningococcal disease	2,746	2,479	2,594	2,930	2,964	2,727	2,451	2,130
Mumps	3,021	2,982	7,790	12,848	4,866	5,712	5,292	4,264
Murine typhus fever	53	37	67	49	54	41	50	43
Pertussis (whooping cough)	2,276	3,589	4,195	2,823	3,450	4,157	4,570	2,719

TABLE 9. (*Continued*) Reported cases of notifiable diseases, United States, 1984–1991

Disease	1984	1985	1986	1987	1988	1989	1990	1991
Plague	31	17	10	12	15	4	2	11
Poliomyelitis, total	9				[1]			
Paralytic	9	8	10	9	9	11	6	10
Psittacosis	172	119	224	98	114	116	113	94
Rabies, animal	5,567	5,565	5,504	4,658	4,651	4,724	4,826	6,910
Rabies, human	3	1	-	1	-	1	1	3
Rheumatic fever, acute	117	90	147	141	158	144	108	127
Rocky Mountain spotted fever	838	714	760	604	609	623	651	628
Rubella	752	630	551	306	225	396	1,125	1,401
Rubella, congenital syndrome	5	-	14	5	6	3	11	47
Salmonellosis, excluding typhoid fever	40,861	65,347	49,984	50,916	48,948	47,812	48,603	48,154
Shigellosis	17,371	17,057	17,138	23,860	30,617	25,010	27,077	23,548
Syphilis, primary and secondary	28,607	27,131	27,883	35,147	40,117	44,540	50,223	42,935
Total, all stages	69,888	67,563	66,215	86,545	103,437	110,797	134,255	128,569
Tetanus	74	83	64	48	53	53	64	57
Toxic-shock syndrome	482	384	412	372	390	400	322	280
Trichinosis	68	61	39	40	45	30	129	62
Tuberculosis	22,255	22,201	22,768	22,517	22,436	23,495	25,701	26,283
Tularemia	291	177	170	214	201	152	152	193
Typhoid fever	390	402	362	400	436	460	552	501
Varicella (chickenpox)	221,983	178,162	183,243	213,198	192,857	185,441	173,099	147,076
Yellow fever				[**]				

* Acquired immunodeficiency syndrome (AIDS).
† Not reported as distinct categories during this period.
§ Beginning in 1984, data were recorded by date of report to state health departments. Before 1984, data were recorded by onset date.
¶ Categories other than paralytic are no longer reported.
** Last indigenous case of yellow fever reported in 1911; before 1996, the last imported case was reported in 1924.

Note: Data in the *MMWR Summary of Notifiable Disease, United States* might not match data in other CDC surveillance reports because of differences in the timing of reports, the source of the data, and the use of different case definitions.

TABLE 10. Reported cases of notifiable diseases, United States, 1976–1983

Disease	1976	1977	1978	1979	1980	1981	1982	1983
Amebiasis	2,906	3,044	3,937	4,107	5,271	6,632	7,304	6,658
Anthrax	2	—	6	—	1	—	—	—
Aseptic meningitis	3,510	4,789	6,573	8,754	8,028	9,547	9,680	12,696
Botulism, total (includes wound and unspecified)	55	129	105	45	89	103	97	133
Brucellosis	296	232	179	215	163	185	173	200
Chancroid	628	455	521	840	788	860	1,392	847
Cholera	-	3	12	1	9	19	—	1
Diphtheria*	128	84	76	59	3	5	2	5
Encephalitis, primary	1,651	1,414	1,351	1,504	1,362	1,492	1,464	1,761
Postinfectious†	175	119	78	84	40	43	36	34
Gonorrhea	1,001,994	1,002,219	1,013,436	1,004,059	1,004,029	990,864	960,633	900,435
Granuloma inguinale	71	75	72	76	51	66	17	24
Hansen disease (leprosy)	146	151	168	185	223	256	250	259
Hepatitis A	33,288	31,153	29,500	30,407	29,087	25,802	23,403	21,532
Hepatitis B	14,973	16,831	15,016	16,452	19,015	21,152	22,177	24,318
Hepatitis, unspecified	7,488	8,639	8,776	10,534	11,894	10,975	8,564	7,149
Legionellosis	235	359	761	593	475	408	664	852
Leptospirosis	73	71	110	94	85	82	100	61
Lymphogranuloma venereum	366	348	284	260	199	203	235	335
Malaria	471	547	731	894	2,062	1,398	1,056	813
Measles	41,126	57,345	26,871	13,597	13,506	3,124	1,714	1,497
Meningococcal disease	1,605	1,828	2,505	2,724	2,840	3,525	3,056	2,736
Mumps	38,492	21,436	16,817	14,225	8,576	4,941	5,270	3,355
Murine typhus fever	69	75	46	69	81	61	58	62
Pertussis (whooping cough)	1,010	2,177	2,063	1,623	1,730	1,248	1,898	2,463
Plague	16	18	12	13	18	13	19	40
Poliomyelitis, total	10	19	8	22	9	10	12	13
Paralytic§	10	19	8	22	9	10	12	13
Psittacosis	78	94	140	137	124	136	152	142
Rabies, animal	3,073	3,130	3,254	5,119	6,421	7,118	6,212	5,878
Rabies, human	2	1	4	4	—	2	—	2
Rheumatic fever, acute	1,865	1,738	851	629	432	264	137	88
Rocky Mountain spotted fever	937	1,153	1,063	1,070	1,163	1,192	976	1,126
Rubella	12,491	20,395	18,269	11,795	3,904	2,077	2,325	970
Rubella, congenital syndrome	30	23	30	62	50	19	7	22
Salmonellosis, excluding typhoid fever	22,937	27,850	29,410	33,138	33,715	39,990	40,936	44,250
Shigellosis	13,140	16,052	19,511	20,135	19,041	19,859	18,129	19,719
Syphilis, primary and secondary	23,731	20,399	21,856	24,874	27,204	31,266	33,613	32,698
Total, all stages	71,761	64,621	64,875	67,049	68,832	72,799	75,579	74,637
Tetanus	75	87	86	81	95	72	88	91
Trichinosis	115	143	67	157	131	206	115	45
Tuberculosis	32,105	30,145	28,521	27,669	27,749	27,373	25,520	23,846
Tularemia	157	165	141	196	234	288	275	310
Typhoid fever	419	398	505	528	510	584	425	507
Varicella (chickenpox)	183,990	188,396	154,089	199,081	190,894	200,766	167,423	177,462
Yellow fever	¶	¶	¶	¶	¶	¶	¶	¶

* Cutaneous diphtheria is no longer notifiable nationally after 1979.
† Beginning in 1984, data were recorded by date of report to state health departments. Before 1984, data were recorded by onset date.
§ No cases with paralytic poliomyelitis caused by wild virus have been reported in the United States since 1979.
¶ Last indigenous case of yellow fever reported in 1911; last imported case reported in 1999.

Note: Data in the *MMWR Summary of Notifiable Disease, United States* might not match data in other CDC surveillance reports because of differences in the timing of reports, the source of the data, and the use of different case definitions.

TABLE 11. Reported cases of notifiable diseases, United States, 1968–1975

Disease	1968	1969	1970	1971	1972	1973	1974	1975
Amebiasis	3,005	2,915	2,888	2,752	2,199	2,235	2,743	2,775
Anthrax	3	4	2	5	2	2	2	2
Aseptic meningitis	4,494	3,672	6,480	5,176	4,634	4,846	3,197	4,475
Botulism	7	16	12	25	22	34	28	20
Brucellosis	218	235	213	183	196	202	240	310
Chancroid	846	1,104	1,416	1,320	1,414	1,165	945	700
Cholera	—	—	—	1	—	1	—	—
Diphtheria	260	241	435	215	152	228	272	307
Encephalitis, primary	1,781	1,613	1,580	1,524	1,069	1,613	1,164	4,064
Postinfectious	502	304	370	439	243	354	218	237
Gonorrhea	464,543	534,872	600,072	670,268	767,215	842,621	906,121	999,937
Granuloma inguinale	156	154	124	89	81	62	47	60
Hansen disease (leprosy)	123	98	129	131	130	146	118	162
Hepatitis A (infectious)	45,893	48,416	56,797	59,606	54,074	50,749	40,358	35,855
Hepatitis B (serum)	4,829	5,909	8,310	9,556	9,402	8,451	10,631	13,121
Hepatitis, unspecified	.....	.....	.....	*	.....	.....	.....	7,158
Leptospirosis	89	89	47	62	41	57	8,351	93
Lymphogranuloma venereum	486	520	612	692	756	408	394	353
Malaria	2,317	3,102	3,051	2,375	742	237	293	373
Measles	22,231	25,826	47,351	75,290	32,275	26,690	22,094	24,374
Meningococcal disease	2,623	2,951	2,505	2,262	1,323	1,378	1,346	1,478
Mumps	152,209	90,918	104,953	124,939	74,215	69,612	59,128	59,647
Murine typhus fever	36	36	27	23	18	32	26	41
Pertussis (whooping cough)	4,810	3,285	4,249	3,036	3,287	1,759	2,402	1,738
Plague	3	5	13	2	1	2	8	20
Poliomyelitis, total	53	20	33	21	31	8	7	13
Paralytic	53	18	31	17	29	7	7	13
Psittacosis	43	57	35	32	52	33	164	49
Rabies, animal	3,591	3,490	3,224	4,310	4,369	3,640	3,151	2,627
Rabies, human	1	1	3	2	2	1	—	2
Rheumatic fever, acute	3,470	3,229	3,227	2,793	2,614	2,560	2,431	2,854
Rocky Mountain spotted fever	298	498	380	432	523	668	754	844
Rubella	49,371	57,686	56,552	45,086	25,507	27,804	11,917	16,652
Rubella, congenital syndrome	14	31	77	68	42	35	45	30
Salmonellosis, excluding typhoid fever	16,514	18,419	22,096	21,928	22,151	23,818	21,980	22,612
Shigellosis	12,180	11,946	13,845	16,143	20,207	22,642	22,600	16,584
Streptococcal sore throat and scarlet fever	435,013	450,008	433,405	†	.....	†	.....	.....
Syphilis, primary and secondary	19,019	19,130	21,962	23,783	24,429	24,825	25,385	25,561
Total, all stages	96,271	92,162	91,382	95,997	91,149	87,469	83,771	80,356
Tetanus	178	192	148	116	126	101	101	102
Trichinosis	77	215	109	103	89	102	120	252
Tuberculosis[§]	42,623	39,120	37,137	35,217	32,882	30,998	30,122	33,989
Tularemia	186	149	172	187	152	171	144	129
Typhoid fever	396	364	346	407	398	680	437	375
Varicella (chickenpox)	.....	.....	*	.....	164,114	182,927	141,495	154,248
Yellow fever	.....	.....	.....	.....	¶	.....	.....	.....

* Not previously notifiable nationally.
† No longer notifiable nationally.
§ Case data after 1974 are not comparable with earlier years because of changes in reporting criteria that became effective in 1975.
¶ Last indigenous case of yellow fever reported in 1911; last imported case reported in 1999.

Note: Data in the *MMWR Summary of Notifiable Diseases, United States* might not match data in other CDC surveillance reports because of differences in the timing of reports, the source of the data, and the use of different case definitions.

TABLE 12. Deaths from selected notifiable diseases, United States, 1989–1998

Cause of Death	ICD*	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998
AIDS†	*042–*044	22,082	25,188	29,555	33,566	37,267	42,114	43,115	31,130	16,516	13,426
Anthrax	022	—	—	—	—	—	—	—	—	—	—
Botulism, foodborne	005.1	2	4	2	1	—	—	2	1	2	—
Brucellosis	023	—	—	—	—	1	—	1	—	1	1
Chancroid	099.0	—	—	1	—	—	—	—	—	—	—
Cholera	001	—	2	2	2	—	1	—	2	—	1
Diphtheria	032	—	1	—	1	—	—	1	—	—	1
Encephalitis, California serogroup viral	062.5	—	—	—	—	—	—	—	1	1	—
Encephalitis, Eastern equine	062.2	1	1	1	1	1	—	1	1	2	1
Encephalitis, St. Louis	062.3	—	13	9	2	1	3	6	—	1	—
Encephalitis, Western equine	062.1	—	—	—	—	—	—	—	—	—	1
Gonococcal infections	098	4	3	3	4	5	3	3	4	3	4
Haemophilus influenzae, invasive disease	041.5	16	16	17	16	7	5	12	7	7	11
Hansen disease (leprosy)	030	4	3	—	2	1	3	2	—	2	—
Hepatitis, viral, infectious (Hep A)	070.0, 070.1	88	76	71	82	95	97	142	121	127	114
Hepatitis, viral, serum (Hep B)	070.2, 070.3	711	816	912	903	1,041	1,120	1,027	1,082	1,030	1,052
Hepatitis, viral, other and unspecified	070.4–070.9	717	686	857	1,016	1,353	1,844	2,231	2,577	2,900	3,630
Malaria	084	11	3	4	8	12	3	8	4	7	6
Measles	055	32	64	27	4	—	—	2	1	2	—
Meningococcal disease	036	273	215	198	201	260	276	273	290	309	234
Mumps	072	3	1	1	—	—	—	—	1	—	1
Pertussis (whooping cough)	033	12	12	—	5	7	8	6	4	6	5
Plague	020	—	—	—	1	2	2	1	2	—	—
Poliomyelitis, total	045.0–045.9	—	—	1	—	—	—	1	—	—	—
Psittacosis	073	1	2	—	4	1	—	—	1	—	—
Rabies, human	071	1	1	3	1	1	3	3	3	4	1
Rubella	056	4	8	1	1	—	—	1	—	—	—
Salmonellosis, including paratyphoid fever	002.1–002.9, 003	99	80	53	47	52	49	66	58	51	37
Shigellosis	004	16	10	10	8	5	13	8	5	5	5
Spotted fevers	082.0	10	20	13	13	5	9	8	6	12	3
Syphilis	090–097	105	106	93	91	80	79	65	73	62	45
Tetanus	037	9	11	11	9	11	9	5	1	4	7
Trichinosis	124	1	—	—	—	—	—	—	—	—	—
Tuberculosis (all forms)	010–018	1,970	1,810	1,713	1,705	1,631	1,478	1,336	1,202	1,166	1,112
Typhoid fever	002.0	—	1	1	—	—	1	—	1	—	—
Varicella (chickenpox)§	052	89	120	81	100	100	124	115	81	99	81
Yellow fever	060	—	—	—	—	—	—	—	1	—	—

* *International Classification of Diseases, Ninth Revision, 1975.* Numbers in this column are *ICD-9* categories.
† Acquired immunodeficiency syndrome (AIDS). In 1987, the National Center for Health Statistics introduced categories *042–*044 for classifying and coding human immunodeficiency virus (HIV) infection. The asterisks are not footnote symbols, but indicate that these codes are not part of *ICD-9*.
§ Varicella was taken off the nationally notifiable disease list in 1991. Many states continue to report these cases to CDC.

Note: Data in the annual *MMWR Summary of Notifiable Diseases, United States* might not match data in other CDC surveillance reports because of differences in the timing of reports, the source of the data, and the use of different case definitions.
Source: National Center for Health Statistics System, 1989–1998. Deaths are classified according to the *ICD-9*. Data for 1999 are not available at this time.

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State and Territorial Epidemiologists and Laboratory Directors

State and Territorial Epidemiologists and Laboratory Directors are acknowledged for their contributions to *CDC Surveillance Summaries*. The epidemiologists and the laboratory directors listed below were in the positions shown as of March 2001.

State/Territory	Epidemiologist	Laboratory Director
Alabama	John P. Lofgren, MD	William J. Callan, PhD
Alaska	John P. Middaugh, MD	Bernard Jilly, PhD
Arizona	Norman Peterson, MD, MPH	Wes B. Press, MS
Arkansas	Thomas C. McChesney, DVM	Michael G. Foreman
California	Duc Vugia, MD, MPH	Paul Kimsey, PhD
Colorado	Richard E. Hoffman, MD, MPH	Ronald L. Cada, DrPH
Connecticut	James L. Hadler, MD, MPH	Katherine Kelley, DrPH
Delaware	A. LeRoy Hathcock, PhD	Jane Getchall, DrPH
District of Columbia	Martin E. Levy, MD, MPH	Maurice Knuckles, PhD (Acting)
Florida	Richard S. Hopkins, MD, MSPH	Ming S. Chan, PhD
Georgia	Paul Blake, MD, MPH	Elizabeth A. Franko, DrPH
Hawaii	Paul V. Effler, MD, MPH	Vernon K. Miyamoto, PhD
Idaho	Christine G. Hahn, MD	Richard H. Hudson, PhD
Illinois	Mark Dworkin, MD, MPH	David L. Maserang, PhD
Indiana	Robert Teclaw, DVM, PhD, MPH	David E. Nauth
Iowa	M. Patricia Quinlisk, MD, MPH	Mary J. R. Gilchrist, PhD
Kansas	Gianfranco Pezzino, MD, MPH	Theresa Hodges (Acting)
Kentucky	Glyn G. Caldwell, MD	Samuel B. Gregorio, DrPH
Louisiana	Raoult Ratard, MD, MPH	Henry B. Bradford, Jr, PhD
Maine	Kathleen F. Gensheimer, MD, MPH	John A. Krueger
Maryland	Jeffrey Roche, MD, MPH	J. Mehsen Joseph, PhD
Massachusetts	Alfred DeMaria, Jr, MD	Ralph J. Timperi, MPH
Michigan	Matthew L. Boulton, MD, MPH	Frances Pouch Downes, DrPH
Minnesota	Richard Danila, PhD, MPH	Norman Crouch, PhD
Mississippi	Mary Currier, MD, MPH	Joe O. Graves, PhD
Missouri	Eduardo Simoes, MSPH	Eric C. Blank, DrPH
Montana	Todd A. Damrow, PhD, MPH	Mike Spence, MD
Nebraska	Thomas J. Safranek, MD	Steve Hinrichs, MD
Nevada	Randall L. Todd, DrPH	L. Dee Brown, MD, MPH
New Hampshire	Jesse Greenblatt, MD, MPH	Veronica C. Malmberg, MSN
New Jersey	Eddy A. Bresnitz, MD, MS	S. I. Shahied, PhD
New Mexico	Mack C. Sewell, DrPH, MS	David E. Mills, PhD
New York City	Benjamin A. Mojica, MD, MPH	Alex Ramon, MD, MPH
New York State	Perry F. Smith, MD	Lawrence S. Sturman, MD, PhD
North Carolina	Newton J. MacCormack, MD, MPH	Lou F. Turner, DrPH
North Dakota	Larry A. Shireley, MPH, MS	Bonna R. Cunningham
Ohio	Forrest W. Smith, MD	William Becker, DO
Oklahoma	J. Michael Crutcher, MD, MPH	John Hitz, DrPH
Oregon	Melvin Kohn, MD, MPH	Michael R. Skeels, PhD, MPH
Pennsylvania	James T. Rankin, Jr, DVM, PhD, MPH	Bruce Kleger, DrPH
Rhode Island	Utpala Bandyopadhyay, MD, MPH	Gregory Hayes, DrPH
South Carolina	James J. Gibson, MD, MPH	Harold Dowda, PhD
South Dakota	Sarah L. Patrick, PhD, MPH	Michael Smith
Tennessee	William L. Moore, Jr, MD	Michael W. Kimberly, DrPH
Texas	Dennis Perrotta, PhD, CIC	Susan Neill, PhD, MBA
Utah	Craig R. Nichols, MPA	Charles D. Brokopp, DrPH
Vermont	Peter D. Galbraith, DMD, MPH	Burton W. Wilcke, Jr, PhD
Virginia	Robert B. Stroube, MD, MPH	James L. Pearson, DrPH
Washington	Juliet VanEenwyk, PhD (Acting)	John Kobayashi, MD, MPH
West Virginia	Loretta E. Haddy, MS, MA	Andrea Labik, PhD
Wisconsin	Jeffrey P. Davis, MD	Ronald H. Laessig, PhD
Wyoming	Karl Musgrave, DVM, MPH	Richard Harris, PhD
American Samoa	Joseph Tufa, DSM, MPH	Joseph Tufa, DSM, MPH
Federated States of Micronesia	Jean-Paul Chaine	—
Guam	Robert L. Haddock, DVM, MPH	Aurelto S. Espinola, MD
Marshall Islands	Tom D. Kijiner	—
Northern Mariana Islands	Jose L. Chong, MD	Joseph K.P. Villagomez
Palau	—	—
Puerto Rico	Carmen C. Deseda, MD, MPH	José Luis Miranda Arroyo, MD
Virgin Islands	Jose Poblete, MD (Acting)	Norbert Mantor, PhD

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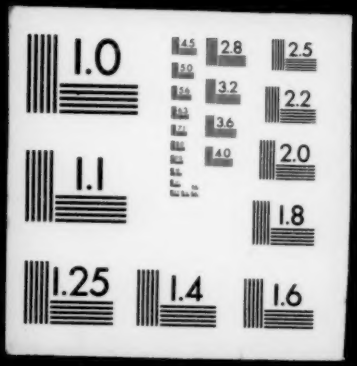
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